Le Patient Connecté





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Plan

- Qualité de l'information
- > HONcode
- > Rôle infirmier et internet
- > Exemple d'un site Web
- > Le futur?











Qualité de l'information concernant la santé des patients sur internet

Que sait-on à ce sujet?

- L'énorme volume d'information sur la santé sur Internet a révolutionné l'éducation des patients
- > Un grand nombre de recherche analyse la qualité de cette information
- > On ne sait pas à quel point ces outils d'évaluation de la qualité sont efficaces
- > Les outils d'évaluation ne sont pas fiables pour prédire la qualité
- > Les outils tels que Google sont des prédicteurs importants de quelle information atteint les patients

Qualité de l'information concernant la santé des patients sur internet

Quelles sont les implications pour la recherche, la politique ou la pratique?

- Améliorer la qualité de l'information sur Internet nécessitera une approche multi-facettes
- > Nécessité d'une meilleure éducation du patient
- ➤ Lignes directives pour soutenir le développement des ressources en ligne

Indicateurs de Qualité

- ➤ Les outils d'évaluation de la qualité sont des systèmes d'indicateurs de qualité
- > Des indicateurs de qualité ont été définis pour tenter de prédire une meilleure qualité des informations sur Internet
- > Outils établis tel que le HONcode



HONcode



- > Autoritaire: indique les qualifications des auteurs
- Complémentarité: l'information devrait soutenir, ne pas remplacer, la relation médecin-patient
- Vie privée: respecte la vie privée et la confidentialité des données personnelles
- > Attribution: cite la (les) source (s) de l'information publiée
- > Justifiabilité: le site doit sauvegarder les revendications relatives aux avantages et à la performance

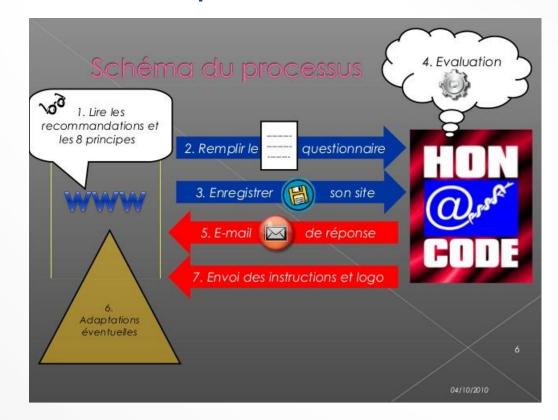
HONcode

> Transparence: présentation accessible, contact précis par email

> Divulgation financière: identification des sources de financement

> Politique de publicité: distinguer clairement la publicité du contenu

éditorial



HONcode

On ne sait pas à quel point ces outils sont utiles HONcode est l'outil d'évaluation de la qualité le plus utilisé



Solutions?

- □ Difficile de faire des recommandations sur une approche optimale de cet environnement complexe et en constante évolution
- □ Est-ce notre rôle d'infirmier de guider les patients vers une information de haute qualité?
- ☐ L'inexactitude des informations sur internet suggère notre contribution aux domaines clés



Solutions?

Dans le contexte clinique, plus de temps passé à discuter avec le patient est une alternative avantageuse et individualisée par rapport à l'information sur Internet





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ONCOLOGY NURSING SOCIETY REPORT

Nursing-Sensitive Patient Outcomes— A White Paper

Barbara A. Given, RN, PhD, FAAN, and Paula R, Sherwood, RN, PhD, CNRN

Executive Summary

Cancer imposes a significant burden on patients, their families, and society, often affecting quality of life for years following initial diagnosis. Outcomes and quality of care for patients with cancer recently have come into question, emphasizing the need to understand the role of nocology nurses in ensuring the delivery of high-quality cancer care aimed at producing measurable and acceptable outcomes. This article describes patient outcomes that are amenable to nursing intervention (nursing-sensitive patient outcomes, INSPOs)) and the role of the Oncology Nursing Society (ONS) in ensuring patients' ability to receive care that enables them to achieve the best outcomes. A focus on improving NSPOs allows us to "drive quality oncology care through clinical practice, research, education, and policy" (ONS, 2004).

Statement of the Issue

As a result of the chronic and potentially debilitating and life-threatening nature of the diagnosis and treatment of cancer, it is important to describe and measure the impact of nursing care on outcomes such as quality of life, symptom management, physical function, performance status, patient satisfaction, resource utilization, and cost. An emphasis on NSPOs has implications for nursing, the public, and policymakers for several reasons. First, because nursing interventions play a vital role in preventing or minimizing symptoms and complications during all phases of cancer care (positive outcomes sensitive to nursing care), nurses continue to be challenged to provide evidence of the extent (Committee on Quality of Health Care in America, Institute of Medicine [IOM], 2001; Hewitt & Simone, 1999) and quality of their contributions to patient outcomes. The demand for professional accountability regarding patient outcomes dictates that nurses are able to identify and document outcomes that are influenced by nursing care. Establishing nurses' role in patients' clinical course and outcomes underscores their importance as a vital and integral members of the multidisciplinary cancer

Second, the public recognizes that the primary mission of oncology nurses is to deliver high-quality care to people with cancer and their families, yet we struggle with ways in which o measure our influence on patient outcomes. Establishing NSPOs for patients with cancer helps to provide tools for use in measuring the impact of nursing care on patients' lives. This enables us to more clearly articulate to consumers the value of our contribution to their care. Finally, establishing NSPOs is critical for policymakers. The quality of patient healthcare outcomes has become a priority for legislators, healthcare agencies, purchasers, regulators, insurers, providers, and consumers as decisions are being made regarding the quality of, access to, and reimbursement of healthcare services. Establishing the impact of nursing care on patient outcomes can justify the contribution of nurses to increasing patient comfort, physical function, and ability to cope and reducing death, disability, suffering, and the economic burden caused

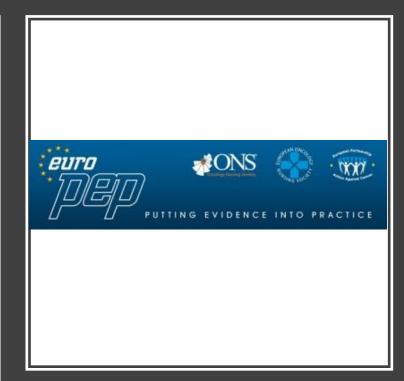
To this end, the Committee on Quality of Health Care in America, 100M (2001), advocated that we incorporate interventions and outcome measures into our daily work, making it possible to understand the extent to which nursing performance is consistent with quality care. Doing this allows us to examine and establish NDQs, ensuring that optimal nursing care is being delivered to patients and reaffirming nurses contributions to quality patient care. It is within this context that we examine NSPOs for ONS to provide a firm understanding of how oncology nurses enhance caneer care delivery to reduce suffering and promote quantity and quality of the context of the c

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Evidence-Based Professional Guidelines based on Nursing Sensitive Patient Outcomes (NSPO)

Evidence-Based Professional Guidelines based on Nursing Sensitive Patient Outcomes (NSPO)

- Nursing-sensitive patient outcomes are outcomes that are attained through or are significantly impacted by nursing interventions
- ❖ The interventions must be within the scope of nursing practice and integral to the processes of nursing care
- Some of these interventions may be applied by patients

FEATURE ARTICLE

Nursing-Sensitive Patient Outcomes: The Development of the Putting Evidence Into Practice Resources for Nursing Practice

Barbara Holmes Gobel, RN, MS, AOCN®, Susan L. Beck, APRN, PhD, AOCN®, FAAN, and Colleen O'Leary, RN, BSN, OCN®

DED

The Oncology Nursing Society (ONS) has worked diligently to improve the care of patients with cancer and their families. A recent project that demonstrates this commitment to quality care is the development of nursing-sensitive patient outcomes resources. ONS has teamed researchers, advanced practice nurses, and staff nurses to develop Putting Evidence Into Practice resources that

provide guidance for nursing interventions based on the evidence. The ability to provide evidence for nursing interventions is critical to all aspects of patient care, including patient teaching, development of patient care policies and procedures, and provision of direct patient care.

vidence-based practice is a concept that has become integral in today's healthcare system. Nurses must be able to provide care to patients and families that is based on the best available evidence so they can potentiate the best possible patient outcomes. According to Rutledge and Grant (2002), evidence-based practice "defines care that integrates best scientific evidence with clinical expertise, knowledge of pathophysiology, knowledge of psychosocial issues, and decision making preferences of patients" (p. 1). Evidence-based practice is unique because it includes the preferences and values of patients and their families in the process. Although clinicians may use the best evidence available, application and outcomes will differ based on patients' values, concerns, expectations, and/or preferences.

The journey of the Oncology Nursing Society (ONS) to improve the quality of oncology care and to integrate evidencebased practice into care has reached a new milestone. ONS has developed a resource to help oncology nurses use evidence in Nursing-sensitive patient outcomes are outcomes that are attained through or are significantly impacted by nursing interventions. The interventions must be within the scope of nursing practice and integral to the processes of nursing care.

The Oncology Nursing Society Putting Evidence Into Practice Resources

The new product line that ONS has developed to improve

Evidence-Based Professional Guidelines based on Nursing Sensitive Patient Outcomes (NSPO)

Barbara Holmes Gobel, (2006), Nursing-Sensitive Patient Outcomes:
The Development of the Putting Evidence Into Practice Resources for Nursing Practice.
Clinical Journal of Oncology Nursing, 10, 5
Lee Ann Johnson, (2014), Putting Evidence Into Practice: The Process for Evidence-Based Research, CJON 2014, 18(6), 2-4 DOI: 10.1188/14.CJON.S3.2-4

Table 2. Putting Evidence Into Practice Weight-of-Evidence Classification Model

| CLASSIFICATION | DEFINITION |
|-----------------------------------|--|
| Recommended for practice | Interventions for which effectiveness has been demonstrated by strong evidence from rigorously designed studies, meta-analyses, or systematic reviews, and for which expec- tation of harms is small compared with the benefits |
| Likely to be effective | Interventions for which the evidence is less well established than for those listed under "recommended for practice" |
| Benefits balanced with harms | Interventions for which clinicians and patients should weigh the beneficial and harmful effects according to individual circumstances and priorities |
| Effectiveness not established | Interventions for which data currently are in- sufficient or of inadequate quality |
| Effectiveness unlikely | Interventions for which lack of effectiveness is less well established than for those listed under "not recommended for practice" |
| Not recommend- ed for practice | Interventions for which ineffectiveness or harmfulness has been demonstrated by clear evidence, or the cost or burden that is neces- sary for the intervention exceeds anticipated benefit |





View from an HCP on the use of the MyDay website



Endorsement

- Patient Organizations
- European Oncology Nursing Society
- National Oncology Nursing Societies
- Individual patients









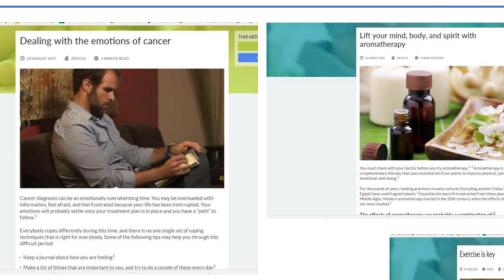




Content



- General & specific
- Covers physical, psychosocial, spiritual & daily life
- Text & podcasts well balanced
- Practical & relevant information
- Subjects of which the patient don't think or don't dare to talk about
- Tips
- Possibility to report adverse events to national authority
- Literature references
- Glossary



What side effects can I expect from

chemotherapy?



Why should I register?

If you have a My Day account, you can use personalised tools to help you take charge of your treatment and your life:



Reminders about appointments and when to take your medications



Set some personal **goals** and improve your well-being today

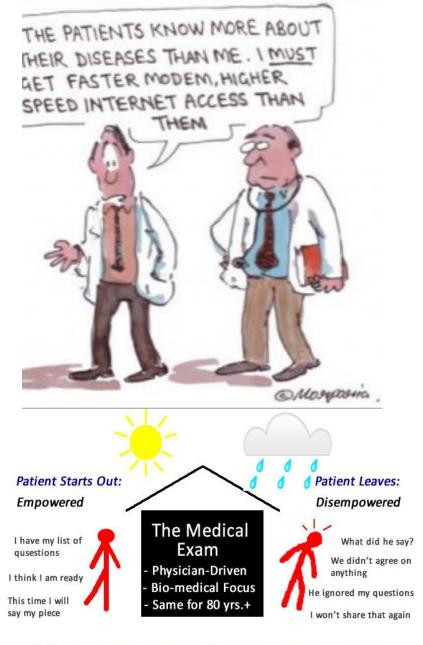


Keep track of when you need to have your injections

Why not start today?

CREATE AN ACCOUNT

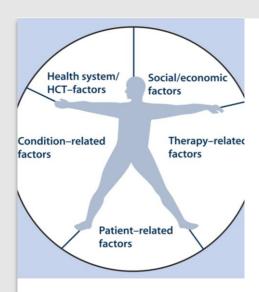
Already registered? log in

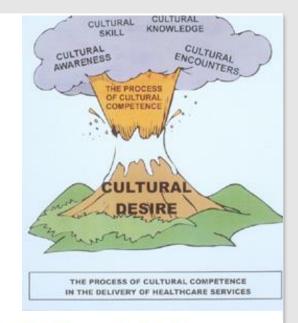


A Trip To The Doctor's Office or Medical Home From the Patient's Perspective

Personal account

- Main issues are covered
- Personal goals & achievement improve patient empowerment
- Reminders are practical and user friendly
- Need more attention from the HCP!
- Space for diary of symptoms & management? – Patient Reported Outcomes
- Source of information & questions for HCP





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"Each capsule contains your medication, plus a treatment for each of its side effects."

New MASCC Subgroup on Cross-Cultural Issues



The Psychosocial Study Group has amounced the formation of its new subgroup, which will focus on cross-cultural issues in supportive care. This initiative was sparked by conversations between group members Sandra Michiels and Patrick Crombez. With different professional perspectives, anthropology and nursing, Sandra and Patrick share experience in hematologic malignancies, and both recognize the complexity of multicultural interactions in daily cancer care. The need for the subgroup was strongly supported by Professor Jean Klastersky at the last MASCCA annual Meeting, for which the group is grateful, and endorsod by the Psychosocial Study Group.

The rationale for this project is that culture affects all aspects of the cancer experience. Gling the observations of MASCG member Autonells Surbone, former Chair of MASCG5 Psychosocial Study Group, Michiels and Crombee note that the meaning patients give to their cancer experience, their suffering, their treatment and the resulting behaviors are always filtered both through the grand narratives provided by different

cultures as well as personal experiences and personalities. Excellent supportive care should involve awareness of the various ways in which culture, immigration, and ethnicity affect therapeutic

transactions. Knowledge, skills, and attitudes about cultural differences lead to more effective clinical interactions, improve therapeutic outcomes, and decrease disparities in cancer care.

As a multidisciplinary and international society, MASCC provides a great opportunity to explore different perspectives, share knowledge, and promote cultural competence, it is expected that the cross-cultural subgroup will serve as a humanistic hub that will promote the exploration of contexts, experiences, and conceptual cross-cultural issues in cancer care.

One aim of the subgroup is to reinforce patient-centered care in line with a holistic approach, respecing specific needs and diversity of cultures and thereby improving patients' and families' quality of care. The subgroup will be proactive in designing interventions that promote cultural competence among cancer care professionals who interact with patients and colleagues from different cultural backgrounds.



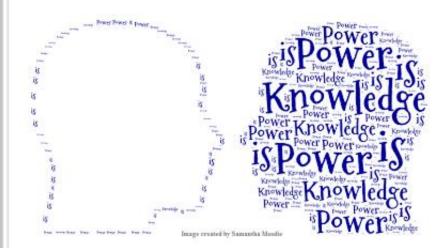
MULTINATIONAL ASSOCIATION OF SUPPORTIVE CARE IN CANCER • WWW.MASCC.OR

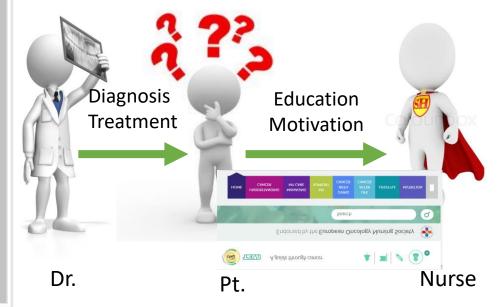
More or too much content?

- Adherence to treatment
- Oncogeriatrics
- Polypharmacy & co-morbidities
- Cross-cultural issues
- Survivorship

Informing the Patient to use the website

- ☐ Hospitalized pts. & ambulatory pts.
- ☐ Every nurse has been informed about the website
- ☐ Esp. case management nurse, oncology nurse navigator (ICSO, Oncocoach,...)
- ☐ Why esp. CMN, ONN?
- > time is an issue
- > individualized assistance to patients, families, and
- > facilitate informed decision making and
- > timely access to quality health and psychosocial care
- > throughout *all phases* of the *cancer continuum*
- ☐ Importance to *include family member as HCP*
- ☐ By browsing the website together with the patient according to the pts' needs





Future opportunities?

✓ More involvement of Patient associations (ECPC) for evaluation and development

- ✓ More involvement of Professional societies
- ✓ Shift to ambulatory oncology
- ✓ Development of link with primary care & the hospital (medical record)
- ✓Online symptom management telephone triage
- ✓ Patient Reported Outcomes (PRO)
- ✓ Development of Integrative Oncology
- ✓ Website as tool to contribute to patient-centered care

What Does the Future Hold for **Health Informatics?**



Essential Dimensions of Informatics and Patient Education



