In the early 1990s, women living in a medically underserved community acted as lay navigators to help other women overcome barriers to breast cancer screening and follow-up (Freeman, Muth, & Kerner, 1995). At that time, treatment for cancer was straightforward. Today, cancer treatment is complex, and understanding the diagnosis, treatment, and healthcare system requires the skill of an oncology nurse navigator (ONN). Navigation includes the entire healthcare continuum—from prevention, screening, diagnosis, treatment, and survivorship to end of life. The goal of navigation is to reduce cancer morbidity and mortality by eliminating barriers to timely access to cancer care, which may be financial, psychological, logistic, or related to communication or the healthcare delivery system.

The Oncology Nursing Society (ONS, 2013) defines an ONN as “a professional registered nurse with oncology-specific clinical knowledge who offers individualized assistance to patients, families and caregivers to help overcome healthcare system barriers. Using the nursing process, an ONN provides education and resources to facilitate informed decision making and timely access to quality health and psychosocial care throughout all phases of the cancer continuum” (p. 7). This definition establishes the importance of ONNs in coordination of care for individuals affected by cancer. The definition specifically calls for nurses with oncology-specific knowledge and application of the nursing process throughout the cancer continuum.

The ONS (2015) position on oncology certification for nurses affirms the value of nurse certification, stating, “Oncology nursing certification provides validation of the specialized knowledge and experience required for competent performance and benefits patients, families, nurses, and employers. Certification validates that nurses have met stringent requirements for knowledge and experience and are qualified to provide competent oncology care” (p. 1).

Studies, including patient-reported outcomes, provide an expanding body of evidence supporting the application of navigation processes and the ONN role (Bensink et al., 2014; Desimini et al., 2011; Freund et al., 2014; Krebs et al., 2013). Noted limitations in published research and the inability to replicate navigation programs and processes often relate to the absence of standardized navigation roles, job descriptions, processes, and ONN qualifications (i.e., credentials, competencies, education, preparation, and experience).

As cancer care evolves, so does the ONN role to meet the needs of patients, families, caregivers, and survivors while serving the needs of the cancer care delivery systems providing evidence-based, cost-effective, and quality patient-centered care. To this end, ONS acknowledges the imperative need to address the ONN role.

**It Is the Position of ONS That**

- Nurses in ONN roles should possess certification through one of the National Commission for Certifying Agencies—accredited certifications offered by the Oncology Nursing Certification Corporation—minimally, Oncology Certified Nurse (OCN®).
- Additional research is needed to systematically characterize and compare navigator activities within and across clinical programs.
- ONNs contribute to or conduct nursing research that supports the understanding of nurse-sensitive, patient-specific outcomes resulting from oncology nurse navigation.
- A core competency of nurses in navigation roles includes care coordination. View the complete resource of ONS ONN Core Competencies at www.ons.org/sites/default/files/ONNCompetencies_rev.pdf.
- Oncology nurse navigation services begin with prevention and screening activities and continue through diagnosis, treatment, and survivorship to end-of-life care.
- ONNs advocate for quality, cost-effective, patient-centered outcomes and facilitate communication between the patient/survivor, caregiver, and interprofessional cancer care team.
- When available, ONNs are responsible for overseeing patient navigation processes, in conjunction with the multidisciplinary team, while including integration of nonprofessionals or lay patient navigators.

Approved by the ONS Board of Directors, June 2015.
References


