Homecare Referrals and 12-Week Outcomes Following Surgery for Cancer

Kathryn H. Bowles, PhD, RN, FAAN, Ruth McCorkle, PhD, FAAN, RN, and Isaac F. Nuamah, PhD

Purpose/Objectives: To determine characteristics of patients undergoing cancer surgery who do and do not receive homecare referral after hospitalization, relative to poor discharge outcomes.

Design: Secondary analysis of a randomized clinical trial.

Setting: Urban, academic cancer center in the northeastern United States.

Sample: 375 patients 60 years and older and admitted for solid tumor cancer surgery.

Methods: Stepwise, multiple logistic regression using patient characteristics related to homecare referrals or those related to poor discharge outcomes.

Main Research Variables: Homecare referral and poor discharge outcome.

Findings: Patients 70 years or older, single, hospitalized for a week or more for a late-stage cancer, with greater than four comorbid conditions, and discharged with more than four daily activity impairments, depressive symptoms, and a need for skilled nursing care were more likely to require home care. Patients not referred to home care who received adjuvant cancer therapies were about three times more likely to have poor discharge outcomes.

Conclusions: Patients who were referred for home care had characteristics similar to medical or surgical patients documented in the literature. However, younger patients with lengthy hospital stays and recipients of adjuvant cancer therapy did poorly after discharge and may benefit from home care.

Implications for Nursing: Certain characteristics, such as age, single marital status, depression, and cognition, should trigger further assessment of patients' needs after discharge, including anticipating needs of patients who will receive adjuvant therapies.

Key Points ...

➤ Identifying the characteristics of patients undergoing surgery for cancer who need homecare referral is important to ensure they receive needed care.

➤ Many patients who do not get a needed referral have poor outcomes after discharge, so clinicians should anticipate the effects of adjuvant therapy on outcomes after discharge and evaluate whether the patient should receive a homecare referral.

➤ Referral for homecare services may provide the monitoring and symptom management needed to avert costly outcomes.

Kathryn H. Bowles, PhD, RN, FAAN, is an associate professor at the NewCourtland Center for Transitions and Health in the School of Nursing at the University of Pennsylvania in Philadelphia; Ruth McCorkle, PhD, FAAN, RN, is the Florence S. Wald Professor of Nursing and director of the Center for Excellence in Chronic Illness Care in the School of Nursing at Yale University in New Haven, CT; and Isaac F. Nuamah, PhD, is an associate director at Johnson & Johnson Pharmaceutical Research and Development in Titusville, NJ. The primary study was funded by a grant from the National Institutes of Health, National Institute for Nursing Research (“Nursing’s Impact on Quality-of-Life Outcomes in Elders.” NR03229, 1992–1997). (Submitted July 2007. Accepted for publication October 8, 2007.)

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