The Institute of Medicine Report on High-Quality Cancer Care: Implications for Oncology Nursing

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The Institute of Medicine (IOM) issued a pivotal report in 2001 on the quality of health care titled *Crossing the Quality Chasm: A New Health System for the 21st Century* (IOM, 2001). Since that report, numerous factors have accelerated the quest to improve the quality of cancer care, including the demand for evidence-based practice, the focus on patient-centered care, and the growing economic burden of cancer care. In September 2013, the IOM issued a new report on high-quality cancer care, titled *Delivering High-Quality Cancer Care: Charting a New Course for a System in Crisis* (IOM, 2013). Because the number of adults older than aged 65 years will double from 2000–2030, this IOM report gave special attention to the aging population as a significant factor that must be addressed to improve the quality of oncology care.

Because the incidence of cancer is increasing along with the costly interventions to treat it, the quality of this care is a critical component in the growing concern about the future of the healthcare system. An estimated 13.7 million people in the United States currently have cancer, and 1.6 million new cases are diagnosed each year. In addition, more than 570,000 cancer deaths occur each year, and substantial attention has been given to the deficiencies in end-of-life care for these individuals (American Cancer Society, 2012). The 2013 IOM report addresses the quality of cancer care across the trajectory from diagnosis, through treatment, long-term survivorship, and care at the end of life. Figure 1 illustrates this continuum of care.

The IOM convened a committee of interdisciplinary professionals to author the report (including the authors of the current article) and examine the barriers as well as the opportunities for delivering high-quality cancer care and to formulate recommendations for improving the cancer care delivery system. The committee developed a conceptual framework with six components of a high-quality cancer care delivery system (see Figure 2). The model has a few key elements.

### Purpose/Objectives
To present key recommendations from a recently released Institute of Medicine (IOM) report on high-quality cancer care.

### Data Sources
The recommendations were derived from the IOM report *Delivering High-Quality Cancer Care: Charting a New Course for a System in Crisis*.

### Data Synthesis
The authors reviewed each of the recommendations to identify implications for oncology nurses.

### Conclusions
Nurses will play a vital role in the future design and delivery of high-quality cancer care.

### Implications for Nursing
Oncology nurses should use the IOM recommendations in their settings to prepare for the delivery of oncology care amidst health system challenges, including an aging society.

### Knowledge Translation
The IOM recommendations identify key areas of concern to nurses. Key aspects of nursing practice, including involvement in advanced care planning, patient-centered care, and evidence-based practice, are essential for high-quality care. Oncology nurses will be centrally involved in healthcare innovations, such as rapid learning systems, and as key members of a well-trained workforce.

- Engaged patients
- An adequately staffed, trained, and coordinated workforce
- Evidence-based cancer care
- A learning healthcare information technology system
- Translation of evidence into clinical practice, quality measurement, and performance improvement
- Accessible, affordable cancer care

This framework guided the committee’s development of its recommendations (see Figure 3). These recommendations apply across all professions and cancer care settings, yet each has unique application and opportunities for oncology nurses as the largest profession within the oncology workforce. Implementing the recommendations of the IOM report will undoubtedly require interdisciplinary collaboration, professional training, and the commitment of health system administrators. Nurses will play a critical role.