



2016 MEMBER SURVEY SUMMARY AND ANALYSIS

Introduction

Traditionally each year ONS conducts a survey of its membership to assess their overall level of satisfaction with their membership and engagement with the Society. In 2016 it was decided to take a different approach to gathering member feedback. This year a brief, 5-question survey was developed that sought feedback on current nursing practice and ONS resources related to practice.

The survey was administered electronically to a random sample of just under 15,000 members. Due to the nature of the questions, the survey sample was limited to Regular and Early Career Professional members residing in the United States. 1,842 responses were received (a 12.7% participation rate).

Included in this report is a summary of the core results, comprehensive analysis, and a comparative demographic breakdown based on certain member characteristics.

Overview of Survey Results

Q1. "What are the most pressing challenges you face today in your practice?" The top 5 responses were:

- 64% Appropriate staffing levels/mix
- 50% Staff training and education
- 38% Sufficient patient care resources (social workers, administrative support services)
- 36% Compassion fatigue
- 29% Reimbursement issues

Q2. "What unique resources could ONS provide to help you better care for your patients?" (open ended question)

The most commonly cited responses related to:

- Resources and information
- Education and training
- Costs

Q3. “What tools or skills have you read or talked about that are used in other specialties that you wonder about application to cancer care or your own practice specifically?” The top 5 responses were:

- 56% Standardized patient assessment tools
- 48% Integrated psychological/psychiatric services
- 39% Automated patient symptom reporting systems
- 30% Web-based patient support groups
- 24% Specialized physical rehabilitation services

Q4. “Which of the following attributes do you associate with ONS?” The top 5 responses were:

- 88% Credible
- 81% Respected
- 64% Valued
- 60% Organized
- 48% Practical

Q5. “What could ONS do to delight you?” (open ended question)

20% of the analyzed sample responded “not sure.” 8% responded with positive comments, such as “ONS is wonderful,” and “ONS already does delight me.” The most frequent themes of responses included:

- Cost
- Education and information
- ONCC related issues
- Congress
- New resources
- ONS website

Complete survey results and detailed analysis follow.



2016 MEMBER SURVEY

N = 1,842 (12.7% response rate)

1. What are the most pressing challenges you face today in your practice? (Select all that apply)			
Responses	Responses	%	Percentage of total respondents
Appropriate staffing levels and/or mix	1186	64%	
Staff training and education	922	50%	
Reimbursement issues	541	29%	
Compassion fatigue	661	36%	
Care coordination	583	32%	
Intimidation from other healthcare professionals (e.g., workplace bullying)	253	14%	
Utilizing EHRs	336	18%	
Patient access to care	343	19%	
Sufficient patient care resources (e.g., social workers, administrative support services)	706	38%	
Workplace hazards (e.g. safe handling and related issues)	176	10%	
Cultural and language barriers	294	16%	
Other (Please specify)*	143	8%	
Total Responses	6,144		
Multiple answers per participant possible. Percentages added may exceed 100 since a participant may select more than one answer for this question.			

***Other** responses were diverse and in most cases very specific. The most commonly cited “Other” responses were:

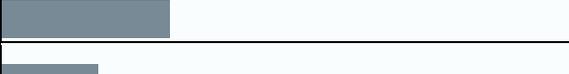
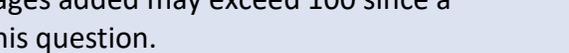
- Frustrations with facility administration/management
- Dealing with physicians/physician orders
- Compensation
- Staff turnover

2. What unique resources could ONS provide to help you better care for your patients?

1,322 responses received. The most commonly cited responses were:

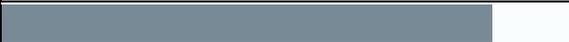
- Resources and information
 - Resources for patients
 - Staffing and work flow resources
 - Resources and tools for navigators
 - Member support groups
 - More information on new drugs and safe handling
- Education and training
 - Particularly related to financial aspects (insurance coverage, value-based care)
- Costs
 - More free CNE
 - Lower prices for all resources, including certification

Detailed analysis of responses to this question begins on page 6.

3. What tools or skills have you read or talked about that are used in other specialties that you wonder about application to cancer care or your own practice specifically? (Select all that apply)			
Responses	Responses	%	Percentage of total respondents
Standardized patient assessment tools	962	56%	
Web-based patient support groups	514	30%	
Web-based video patient conference and evaluation	299	17%	
Automated patient symptom reporting systems	674	39%	
Automated discharge planning systems	341	20%	
Specialized physical rehabilitation services	416	24%	
Integrated psychological/psychiatric services	836	48%	
Other (Please explain)*	129	7%	
Total Responses	4,171		

Multiple answers per participant possible. Percentages added may exceed 100 since a participant may select more than one answer for this question.

***Other** responses were very diverse and difficult to categorize. 21% of these responses were simply “none” or “not sure.” Many responses related to automated/integrated services and patient education resources.

4. Which of the following attributes do you associate with ONS? (Select all that apply)			
Responses	Responses	%	Percentage of total respondents
Credible	1610	88%	
Creative	304	17%	
Effective	722	39%	
Organized	1107	60%	
Innovative	522	28%	
Visionary	542	30%	
Practical	875	48%	
Responsive	446	24%	
Respected	1476	81%	
Valued	1182	64%	
Inclusive	413	23%	
Other (Please specify)*	83	5%	
Total Responses	9,282		

Multiple answers per participant possible. Percentages added may exceed 100 since a participant may select more than one answer for this question.

***Other** responses were diverse. The most commonly cited “Other” responses were:

- Expensive
- Evidence-based
- Poor website
- Professional
- Supportive

5. What could ONS do to delight you?

1,239 responses received. 20% of the analyzed sample responded “not sure.” 8% responded with positive comments, such as “ONS is wonderful,” and “ONS already does delight me.” The most frequent themes of responses included:

- Cost
- Education and information
- ONCC related issues
- Congress
- New resources
- ONS website

Detailed analysis of responses to this question begins on page 8.

Content Analysis of Verbatim Survey Responses

The most frequently identified concepts and themes from content analysis are outlined below for each question. Examples of verbatim responses are provided.

1. Question: What unique resources could ONS provide to help you better care for your patients?

Responses were given by 963 individuals (74.1% of the sample). Overall 676 (52%) were related to resources and information, 514 (39.5%) responses were related to education and training and 116 (8.9%) were related to costs.

Resources and Information (52% of responses)

1) Resources for patients (230/ 24% of respondents)

Patient-facing education sheets that are evidence-based and without commercial bias that address general symptom management strategies. General information about chemotherapy administration ("Chemo 101") to provide to our patients.

Reproducible education sheets for the patients

Provide websites that would assist with patient resources

Could you be a resource we could access for info on drugs, compatibilities, education to share with or teach our patients. In simple language

2) Staffing and work flow resources (193/20% of respondents)

Develop an acuity tool for oncology patients receiving chemotherapy in an ambulatory infusion center that will help support safe staffing levels based upon the regimen, complexity, potential for reaction and other factors that impact the level of service provided to each patient. In addition to this, capturing the time needed to start the IV, access a port, de-clot if necessary, provide proper patient education/teaching, time for documentation and other factors that impact patient chair times

Outpatient staffing guidelines and appropriate training requirements for nurses who are responsible for oncology infusion patients.

recommended staffing ratios and skill mix recommendations supported by literature

safe patient ratio data on floors that administer chemotherapy. Currently oncology at our medical center is not recognized as a specialty and has a 6:1 ratio when administering chemotherapy

We need work flow that is better. Our patient waiting room is backing up from being overbooked. We need some information on other cancer centers.

3) Other (253/26.3% of respondents)

There was a wide variety of other types of resources identified in comments. Clusters of comments were seen in the following areas:

a) Resources and tools for navigators

I'd love to see more social-work type stuff. As a navigator, it's not just the clinical/nursing part of treatment I help patients navigate through. It's also the insurance and financial assistance and red tape that aren't really taught in nursing school or can be easily picked up as a staff nurse (inpatient). Otherwise, I love everything ONS is doing. Keep up the great work.

Standardized templates for patient needs assessment and standardized communication tools for nurse navigators' positions. I understand the difficulty in creating those for such a vast and varying group, however, I believe it would help the discipline of nurse navigation to become a more uniform and specific title and position. Navigation needs it.

b) Member support groups

Professional online support groups lead by oncology nurses e.g. chat, Skype, messenger

Support groups for nurses with resources for psychological help and how to deal with workplace bullying both from management and peers.

c) More information on new drugs and safe handling

Updates on new drugs as they become FDA approved to include nursing snippets about the medication that would not be easily found in the package insert

*Instant access to drug information specifically pre meds required, and time of infusions, also potential reactions. Mostly for new drugs as they come out
More information on Safe Handling of Hazardous drugs.*

More up to date information on new drugs, how to give them, and side effects seen.

iPad access to chemo regimens with anti-emetic protocols; iPad access to disease and treatment related regimens both chemo and bio therapy etc

In the medication reviews, include the latest UpToDate or NCCN guidelines pre-medication including any anti-emetic and support drugs such as diphenhydramine, famotidine, acetaminophen, etc....

Extremely limited resources available for pre-chemotherapy support drugs.

A reliable, free, accurate AUC dosing calculator for Carboplatin dosing.

A pocket guide for nurses for immunotherapy side effects and management.

A detailed guide to ESA's and dosing criteria.

Education and training (39.5% of responses)

There were conflicting comments as well as comments expressing desire for education on a wide array of very specific topics. Individuals stated that education is too basic, while others stated more education is needed at a basic level. Conflicting comments were also seen regarding the format of educational offerings, with some saying there is too much online, others saying they would like to see more online education opportunities – particularly on-demand opportunities. There were a few suggestions for interactive online training or online moderated discussion forums. One cluster was seen expressing the desire for educational content in financial aspects of healthcare.

A. Financial aspects (35/3.5% of respondents)

Education on how to obtain prior auths for PO chemos from insurance companies

*Assistance with understanding insurance reimbursement ex Medicare, "donut hole"
Information about insurance. Clear info on what is a copay or deductible, where do trials fit with insurance, how to get response from insurance company.*

*Education on insurance changes and requirements for reimbursement of services.
webinars accessible anytime on what "value-based care" means. This is the direction healthcare is going & I think membership needs to understand the concept, the goal, how it applies to Oncology. Free with CEs*

Cost (116/12% of respondents)

All comments in this area had to do with wanting more free continuing education, lower prices for all resources and increased cost of certification with new requirements for continuing education.

Question 2. What could ONS do to delight you?

Overall, 851 (64.5%) responded to this question. Of these, 169 said they were unsure and 67 made positive comments such as:

Continue the pushing the value of excellence in oncology nursing. ONS is wonderful and has made a huge impact on how oncology nurses can practice at the top of their license. ONS does delight me. I went to Congress this year for first time- I went to workshop for first time. I was very happy to have participated in both.

Among the remaining 615 respondents, most frequent themes included cost, education and information, ONCC related issues, the ONS website, new resources and Congress related comments.

Cost (274/44.6%)

Comments in this area included desire for more free CNE and other resources and reduce costs of all types of ONS offerings as well as ONCC certifications.

Make some of the present resources more reasonably priced - it is expensive for those of us who do not have an organization to pay the bill.

I would love to purchase more books/courses, but the prices are still steep; even with the membership discount. Offer 'black Friday' sales or something, so we can load up and read throughout the year!

Education and Information (217/35.3%)

Comments in this area included ideas for highly individual and specific content, level of content and other characteristics. There were approximately equal numbers who said that content was too advanced and who said that content was not advanced enough. There were clusters of requested content in areas of finance and insurance information, care coordination, and leadership and management, particularly for non-oncology prepared managers.

Make every course and event a valued experience. Streamline the courses. They quickly become overwhelming and frustrating - too much info. More isn't always better.

Update educational offerings annually. When I do a course and the references are from 2007 or earlier I do not consider that to be the most updated information. Additional courses about changes in oncology (i.e.: requirements by the COC, bundled payments) so RN's can stay updated.

ONCC Related (111/18.0%)

Comments related to certification and recertification were about processes and cost.

Make certification process simpler. Make the tracking of hours for certification shorter and in an application that is far less labor intensive. it should not take hours and hours to maintain and submit contact hours for certification renewal. The whole process is frustrating and difficult. Additionally you should have more economical courses for renewal.

You could make the education that has been attained through ONS programs, particularly web based programs, integrate automatically into the ONCC recertification documentation. Because your CUE's are already divided into the various required domains, this would be a huge time saver for renewal applicants and would be an added incentive for using ONS courses to get the needed education to achieve recertification I love being certified, but has cost me a small fortune. is it a valuable test? or just status for the "club"?

Website (90/14.6%)

Comments had to do with difficulty using and navigating the ONS and virtual community sites.

Fix the website please. Make it user friendly. Also need chapter websites easier to navigate. Would like a workshop in that at next meeting.

I have never found a single ONS member that thinks the website it effective, efficient, exciting.

update web site for easier navigation. Have an on line chat or readily available access line to support member inquiry.

New resources (73/11.9%)

Respondents gave numerous suggestions for new types of resources in response to this question

How about a cancer-fighting video game that you win by providing optimal patient care? It would be great for people who learn that way!

Would love standardized chemo teaching video for those without Internet access

Add sample care integration plans

Publish information about work flows in cancer infusion centers. When are labs drawn? how is the work flow and how many patients or what acuity level is max for a nurse during a day?

Congress related (43/7.0%)

Responses were related to areas such as content and location, as well as ideas regarding access to the information from Congress.

Continue to increase the on demand educational opportunities and stream Congress for those who are unable to attend

Have patient survivors speak at Congress! Patients sharing stories & feedback on the importance of what we do & the impact we have on their lives have been key to keeping my passion for Oncology nursing alive for over 15 years. There is no greater reward than hearing how we touch lives across the planet.... knowing that we truly make a difference!

Gear more of their teaching and topics to hospital based oncology nurses. What I have found from attending Congress and taking the Biochemo exam is that a lot of the info you provide and test questions relate to oncology nurses in outpatient setting. The hospital nurse feels left out and we don't know what takes place in the outpatient settings so answering some of the questions is near impossible and you can't find the info easily.

continue to beef up Congress research tract in coming years with reengagement of oncology nurse researchers