Reliably Addressing “What Matters” Through a Quality Improvement Process

Patricia A. Rutherford, MS, RN

Oncology nurses have a critical role in mitigating the intense vulnerability, loss of control, and fear of the unknown that characterizes the experiences of patients with cancer and their family members. Reliably inquiring about the issues that are at the forefront for patients and their loved ones can encourage a deeper dialogue—where nurses can understand and address the issues that are most important to them. A practical quality improvement approach can help to ensure that processes are in place to assist nurses in devoting time to reliably inquire about “what matters” to each patient at every encounter.

At a Glance

- Inquiring about what matters to patients at every encounter is a key element of relationship-based care.
- Using a practical quality improvement framework enables nurses to create, test, and implement reliable processes to assess and address the issues that are most important to patients.
- Developing, testing, reliably implementing, and spreading changes are essential improvement abilities for oncology nurses in all clinical settings.

Patricia A. Rutherford, MS, RN, is the vice president of the Institute for Healthcare Improvement in Cambridge, MA. The author takes full responsibility for the content of the article. The author did not receive honoraria for this work. No financial relationships relevant to the content of this article have been disclosed.

Key words: oncology nurses; quality improvement; what matters to patients

Digital Object Identifier: 10.1188/16.CJON.20-22

The concept of asking, “What matters to you?” as well as, “What is the matter?” was introduced by Barry and Edgman-Levitan (2012) in the context of implementing shared decision making among patients, their families, and the healthcare team. Barry and Edgman-Levitan (2012) wanted to increase clinicians’ awareness of important issues in patients’ lives that could drive customized plans of care. Leaders at the Institute for Healthcare Improvement (IHI) believe that “What matters to you?” is a simple yet profound concept that is key to creating deeply personal engagements with patients and their family members through a greater understanding of what is in the forefront of their minds at each encounter. Inquiring about what matters can encourage a deeper dialogue, serving as a foundation for developing genuine partnerships with patients and family members to transform their experiences of care (IHI, 2015a, 2015b).

Oncology nurses seek to understand the comprehensive needs and goals of the patients and families they serve. However, in the busy world of clinical care, innumerable situations arise in which what really matters is not understood or addressed. The critical role of oncology nurses in mitigating the intense vulnerability, loss of control, and fear of the unknown that characterizes the experiences of patients with cancer and their families was described by Gross (2015), in which the following call to action was put forth.

What if we created a space for every patient every day where, in a consistent manner, we assess and address the issues that are most important to them? What would we discover by making this as important and as consistent a practice as the safety steps in chemotherapy administration? (Gross, 2015, p. 144)

How should teams of oncology nurses embark on the quality improvement journey to reliably inquire about what matters for each patient at every encounter? The Model for Improvement (Langley et al., 2009), used by IHI and countless others as the engine for change and improvement, is one methodology that can help teams get started. The following introduction to the Model for Improvement describes the fundamentals for a practical approach for quality improvement and includes examples of how each step can guide the reliable implementation of “What matters to you?” in an infusion center for patients with cancer.

Model for Improvement

The Model for Improvement is a framework for accelerating the pace of improvement (Associates in Process Improvement, 2015) and is not meant to replace other change models that oncology nurses may already be using.