





From Publication to Practice: Lessons in Building and Implementing Sustainable Patient Navigation Programs

ACS NNRT Webinar

June 25, 2025

The American Cancer Society National Navigation Roundtable (ACS NNRT) was established in 2017. The ACS NNRT is a national coalition of 80 member organizations to advance navigation efforts that eliminate barriers to quality care, reduce disparities, and foster ongoing health equity across the cancer continuum. The American Cancer Society provides organizational leadership and expert staff support to the ACS NNRT.

Ground Rules



- Nonpartisan Commitment & Discussion Guidelines

 ACS/ACS CAN is a nonprofit, nonpartisan organization. We believe everyone should have a fair and just opportunity to prevent, detect, treat, and survive cancer. We
- 2 Rules for engagement clarify the expectations for participation by members and representatives of the ACS NNRT. Members are expected to respect and comply with these Rules and all other applicable ACS policies.
 - You can reference the Rules for Engagement anytime on our <u>website</u>.

therefore ask that you avoid partisan topics and opinions today.

Confidentiality

This webinar is being recorded. Please be mindful of our conversation and respectful of others' privacy. Do not identify or discuss specific patients by name.

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MISSION

High quality cancer care for all through evidence-based patient navigation

VISION

NNRT is a collaboration that advances patient navigation efforts to eliminate barriers for quality care, reduce disparities in health outcomes and foster ongoing health equity across the cancer continuum.

Five-Year AIM (2021-2026)

To support the creation of a sustainable model for oncology patient navigation to achieve health equity across the continuum of cancer care.

https://navigationroundtable.org/







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Disclosures



Linda Burhansstipanov, MSPH, DrPH, OPN-CG Founder, Native American Cancer Research Corporation Founder, Owner & President, Native American Cancer Initiatives, Inc.

Founder, Owner & President, NavPoint Health, Inc.

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Publications: ACS NNRT WorkForce Development Task Group

2019: PN Competency-Based Training

Commentary

Findings From the National Navigation Roundtable: A Call for Competency-Based Patient Navigation Training

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INTRODUCTION

The purpose of this article is to describe the availability of patient navigation training programs in the United States, assess the content of these programs, and report which address the core competencies of patient navigation. According to Harold P. Freeman, the founder of the patient navigation model, "patient navigation is a patient-centric healthcare service delivery model. It is a patient-centric concept that concentrates on the movement of patients along the continuum of medical care ... beginning in the community and continuing on through testing, diagnosis, and survivorship to the end of life." I The goal of patient navigation is to improve outcomes in underserved populations by eliminating barriers to a timely cancer diagnosis and treatment in a culturally sensitive manner. Patient navigators (PNs) may be employed as community-based navigators addressing screening barriers and helping prepatients access portals to health care, as health system navigators helping patients to overcome structural and psychosocial barriers to quality care, and as survivorship navigators helping patients who are post–active treatment to overcome barriers to ongoing surveillance and supportive care while transitioning from oncology care back to a primary care provider or in the transition to other end-of-life care.

Throughout the research literature, there have been challenges to clearly defining the role of PNs, including overlapping convergence of the PN role with other roles such as care coordinators ³ and community health workers (CHWs). ⁴ These challenges in large part have been driven and exacerbated by the types of individuals providing patient navigation, who range from PNs without a clinical practitioner license (called lay or nonclinical) to social workers and nurses who have professional licenses and are cross-trained in patient navigation. This inexact scope of work for someone identified as a PN proves problematic when one is outlining the training needed to meet health system navigation needs. Some health systems, particularly those with high patient volumes, use a navigation matrix with navigational tasks assigned across a team. Evidence to date supports the use of individual and team-based navigation (eg, lay and licensed PNs) to improve health outcomes. ⁵ However, evidence-based research has been limited in assessing the types of training required for PNs. A systematic review of patient navigation programs indicates that training tends to be specific to research protocols rather

Valverde, P.A., Burhansstipanov, L., Patierno, S., Gentry, S., Dwyer, A., Wysocki, K.L., Patterson, A.K., Krebs, L.U., Sellers, J. and Johnston, D. (2019), Findings from the National Navigation Roundtable: A call for competency-based patient navigation training. Cancer, 125: 4350-4359. https://doi.org/10.1002/cncr.32470

2024: PN Levels of Expertise

DOI: 10.1002/cncr.35147

COMMENTARY

Patient navigation job roles by levels of experience: Workforce Development Task Group, National Navigation Roundtable

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Plain Language Summary

- Cancer patient navigators work in diverse settings ranging from communitybased programs to comprehensive cancer centers to improve outcomes in underserved populations by eliminating barriers to timely cancer prevention, early detection, diagnosis, treatment, and survivorship in a culturally appropriate and competent manner.
- This article clarifies the roles and responsibilities of Entry, Intermediate, and Advanced level cancer patient navigators. The competencies described in this article apply to patient navigators, nurse navigators, and social work navigators.

 This article provides a resource for administrators to create job descriptions for
- Inis article provides a resource for administrators to create job descriptions for navigators with specific levels of expertise and for patient navigators to advance their oncology careers and attain a higher level of expertise.

Varanasi AP, Burhansstipanov L, Dorn C, Gentry S, Capossela MA, Fox K, Wilson D, Tanjasiri S, Odumosu O, Saavedra Ferrer EL. Patient navigation job roles by levels of experience: workforce Development Task Group, National Navigation Roundtable. Cancer. 2024; 1–19. doi:10.1002/cncr.35147. http://doi.org/10.1002/cncr.35147

2025: Job Descriptions Based on PN Expertise

Received: 25 November 2024 Revised: 18 December 2024 Accepted: 22 January 2025				
DOI: 10.1002/cncr.35764				
COMMENTARY				
Job descriptions by oncology patient navigator experience				
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Correspondence Arti Patel Varanasi, Advancing Synergy, Baltimore, MD, USA, Email: avaranasi@advancingsynergy.com	Plain Language Summary This article provides guidance and examples for creating patient navigator job descriptions based on levels of expertise that align with the roles and responsibilities detailed in the January 2024 publication. The National Navigation Roundtable (NNRT) Workforce Development Task Group (WFD) provided their knowledge and experiences to inform job descriptions for navigators at different levels of proficiency (entry, intermediate, and advanced). The 2024 table can assist administrators by showing a linear progression of skills based on levels of expertise from entry to advanced level navigators. Detailed job descriptions enable the navigator to evolve and grow professionally.			

Varanasi AP, Burhansstipanov L, Gentry S, Chappell M, Dorn C, McMahon J, Bradsher K, Saavedra Ferrer E, Barnett LM, Leighliter M, Wilson DM, Lewis T. Job Descriptions by Oncology Patient Navigator Experience: workforce Development Task Group, National Navigation Roundtable, Cancer, 2025

American Cancer Society National Navigation Roundtable, cancer continuum, clinical





WHY?

To provide a resource for administrators to create job descriptions for navigators with specific levels of expertise.

To provide a resource for patient navigators to advance their oncology careers and attain a higher level of expertise.





Clearer job descriptions with better training & evaluation opportunities Integration of navigators within healthcare teams and improved care coordination

Task-shifting and task-sharing to overcome barriers





PN Job Roles by Levels of Experience

Entry

One to two years or equivalent experience. Starting a new position without experience in navigation and builds on resources for addressing barriers (logistical, economic, cultural & linguistic, communication, and provider centered) and basic Oncology Patient Navigator-Certified Generalist (OPN-CG) principles to guide practice.

Intermediate

Three to Four years or equivalent to such effort. Possesses a basic understanding of patient care flow within job boundaries, matching resources to the unique needs of the patient, identifying resources lacking in the community of care, beginning to analyze needs and gaps, and exploring/collaborating with multidisciplinary team members to advocate for resources for unmet needs for community or clinical setting.

Advanced

Five or more years. Skilled in the ability to perceive patient situations holistically based on past experiences, focusing in on the unique aspects of the patient assessment, and uses critical thinking and decision-making skills pertaining to navigation processes. Builds on and includes all knowledge, skills, roles, and responsibilities from Entry and Intermediate navigators.

Patient navigator roles and responsibilities progress from entry through advanced levels beginning with outreach in the community and learning how to identify and address barriers.

Domains and Competencies Based on Oncology Navigation Standards of Professional Practice





DOMAINS COMPETENCIES

I. Ethical, Cultural, Legal, and Professional Issues – Process (How) Demonstrate sensitivity and responsiveness to a diverse patient population, including but not limited to respecting confidentiality, organizational rules and regulations, ethical principles and diversity in gender, age, culture, race, ethnicity, religion, abilities, sexual orientation and geography.

II. Client and Care Team Interaction - Process (How)

Apply insight and understanding concerning human emotional responses to create and maintain positive interpersonal interactions leading to trust and collaboration between patient/client/family and the healthcare team. Patient safety and satisfaction is a priority.

III. Health Knowledge – Content (What)

Demonstrates breadth of health, the cancer continuum, psychosocial and spiritual knowledge, attitudes and behaviors specific to their PN (clinical/licensed or non-medical) role.

IV. Patient Care CoordinationProcess and Content (How and What)

Participates in the development of an evidence-based or promising/best practice patient-centered plan of care, which is inclusive of the client's personal assessment and health provider/system and community resources. The PN acts as liaison among all team members to advocate for patients to optimize health and wellness with the overall focus to improve access to services for all patients. PN conducts patient assessments (needs, goals, self-management, behaviors, strategies for improvement) integrating clients' personal and cultural values.

V. Practice-Based Learning

Optimizes navigator practice through continual professional development and the assimilation of scientific evidence to continuously improve patient care, based on individual PN gaps in knowledge, skills, attitudes and abilities.

VI. Systems-Based Practice

Advocate for quality patient care by acknowledging and monitoring needed (desirable) improvements in systems of care for patients from enhancing community relationships and outreach through end-of-life. This includes Enhancing community relationships, developing skills and knowledge to monitor and evaluate patient care and the effectiveness of the program.

VII. Communication/ Interpersonal Skills Promote effective communication and interactions with patients in shared decision making based on their needs, goals, strengths, barriers, solutions and resources. Resolution of conflict among patients, family members, community partners and members of the oncology care team is demonstrated in professional and culturally acceptable behaviors.

Excerpt from 2024 Table of Levels and Skills





I. Domain: Ethical, Cultural, Legal, and Professional Issues – Process (How)

Competency: Demonstrate sensitivity and responsiveness to a diverse patient population, including but not limited to respecting confidentiality, organizational rules and regulations, ethical principles and diversity in gender, age, culture, race, ethnicity, religion, abilities, sexual orientation and geography.

ITEM	THEMES	ENTRY [knowledge & comprehension]	INTERMEDIATE [application & analysis]	ADVANCED [synthesis & evaluation]
I.3	Help & Referral	Recognize when to help and refer the patient navigate to appropriate health care.	Assist the patient in navigating to appropriate health care by assessing and referring patients to appropriate, culturally-relevant experts to assist with ceremonies or special services beyond one's personal level of expertise.	While (and after) the patient is receiving appropriate health care, collect interview or survey data in a culturally-competent manner that complies with the given methodological design of the protocol.
I.4	Cultural Knowledge & Behaviors	Develop, maintain, and utilize an organizational system to record and update healthcare, cultural relevance, health literacy, and linguistically appropriate resources for patients and their communities. Collect data and share with the organization leadership.	Demonstrate culturally-respectful behaviors when assisting patients with ceremonies or special services (that are pertinent to the patients' cultural healthcare values, beliefs, and practices).	Implement cultural knowledge and sensitivity in all aspects of work, including: (1) seeking to understand and acting in accordance with specific cultural norms when appropriate; (2) awareness of potential bias in one's own culture and life experience; and (3) awareness of the influence of diverse beliefs and practices on thinking and behavior across cultures, communities, and organizations.





Example: Excerpt for Intermediate Patient Navigation Job Roles, Competency

Dom	Domain for competency I: Ethical, cultural, legal, and professional issues				
No.	Themes	Intermediate PN job roles reflecting application and analysis			
I.1	Confidentiality	Demonstrate patient confidentiality and privacy when working with clinical and professional staff both within and outside of systems of care and community-based programs.			
I.2	Assessment &	Use assessment information to follow plans to address health and related patient			
	Record keeping	needs in cooperation with the patient and based on patient priorities.			
I.3	Help &	Assist the patient in navigating to appropriate health care by assessing and			
	Referral	referring patients to appropriate, culturally-relevant experts to assist with ceremonies or special services beyond one's personal level of expertise.			
I.4	Cultural knowledge & Roles	Demonstrate culturally respectful roles when assisting patients with ceremonies or special services (that are pertinent to the patients' cultural healthcare values, beliefs, and practices).			
I.5	Privacy Laws & policies (HIPAA)	Develop documentation that complies with applicable privacy laws and policies (e.g., Health Insurance Portability and Accountability Act [HIPAA]).			
I.6	Behavior Change	Adapt to behavior changes and patient options in a culturally sensitive manner and be able to coach a patient through a behavior change.			
I.7	Respectful Behavior	Demonstrate the ability to identify and suggest alternatives that respect patients' privacy and modesty (e.g., during a Pap smear, some patients may prefer to wear a blouse or shirt).			
I.8	Health Equity	Describe ways PN roles and strategies can promote health equity throughout the cancer continuum.			





Using the Table to Generate Job Descriptions

Step 1

 Review the levels entry, intermediate or advanced (in columns) → This step involves determining budget for salary and benefits

Step 2

 Review the table for the behaviors from each competency and determine which are relevant for your program

Step 3

 Cut and paste and review with others from your organization as to priorities

Step 4

• Draft interview questions or scenarios

Step 5

 Release job description at local, regional and national sites

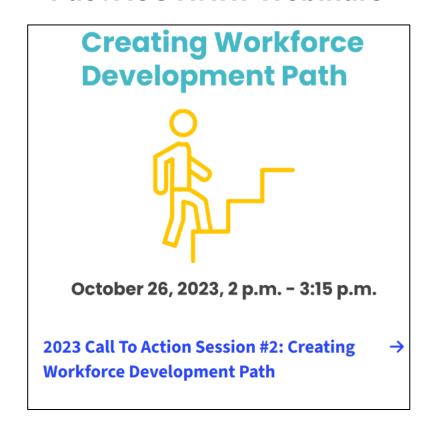




The Reality: From Publication to Practice



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Thought Leaders







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Tracie Lewis, MPHOperations Director Colorectal Cancer Prevention Network
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Questions



Type them in the Question-and-Answer box at the bottom of your screen





Follow-Up & Contact

The full table are posted on ACS NNRT website and individual member sites:

https://navigationroundtable.org/wp-content/uploads/Workforce-Development-Job-Performance-Behaviors.pdf

https://advancingsynergy.com/our-work/

https://natamcancer.org/userfiles/2522/files/Workforce%20Development%20Job%20Performance%20Behaviors.pdf

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Thank you!













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