

ANI Innovator Profile

Oncology Nursing Society (ONS)

Interview with Elizabeth Wertz Evans, RN, BSN, MPM, FACMPE, CPHQ, CPHIMS, FHIMSS
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www.ons.org

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The Alliance for Nursing Informatics (ANI) is a collaboration of organizations that represents more than 5,000 nurse informaticists and brings together 30 distinct nursing informatics groups globally.

Mission: To advance NI leadership, practice, education, policy and research through a unified voice of nursing informatics organizations

Vision: Transform health and health care through nursing informatics and innovation

ANI Innovator Profiles Program

The purpose of this program is to capture an ANI Innovator Profile for each ANI member organization to increase awareness and visibility, and to describe their contribution towards a unified voice for nursing informatics.

ANI Innovator Profile – ONS

The Oncology Nursing Society (ONS) is a professional organization of over 35,000 registered nurses and other healthcare providers dedicated to excellence in patient care, education, research, and administration in oncology nursing.

Our **mission** is to promote excellence in oncology nursing and quality cancer care.

Our **vision** is to lead the transformation of cancer care.

Our **core values** are Integrity, Innovation, Stewardship, Advocacy, Excellence, and Inclusiveness.

ONS members are a diverse group of professionals who represent a variety of professional roles, practice settings, and subspecialty practice areas. Registered nurses, including staff nurses, advanced practice nurses, case managers, educators, researchers, and consultants, and other healthcare professionals, benefit from membership. The Society offers useful information and opportunities for nurses at all levels, in all practice settings, and in all subspecialties.

ONS members receive a wide array of useful professional resources. Visit the [Membership](#) area for a complete list of member benefits.

How We Started

ONS traces its origin to the first National Cancer Nursing Research Conference, supported by the American Nurses Association and the American Cancer Society (ACS) in 1973. Following this conference, a small group of oncology nurses met to discuss the need for a national organization to support their profession. Since its official incorporation in 1975, ONS has become a leader in cancer care. It has grown to include 231 chapters and 27 special interest groups. It provides information and education to nurses around the world. In addition, the Society plays an active role in advocacy activities at the local, state, national, and international levels.

ONS Interview with Elizabeth Wertz Evans:

1. What is the primary mission of ONS?

The mission of ONS is really very simple, to promote excellence in oncology nursing and quality cancer care. In everything we are trying to do, whether its research or marketing, we try to make sure that what we are doing reflects that mission.

2. How many members do you currently have?

We have a little over 35,000 members. We do have a fair number of international members now and we have been doing some things internationally from an educational standpoint, so we are seeing an increase in the number of members we have outside the United States.

3. What projects is ONS working on to advance informatics and innovation in healthcare?

We are new to the informatics area at ONS. When I came to the organization, I had a background in nursing informatics and health information technology (HIT); and it was an area that everyone was interested in but hesitant to jump into that 'pool of water.' One of the things we did was to create a nursing informatics focus group. We launched that earlier this year before our National Congress. What we found is that there are many ONS members that are very interested in informatics and may not yet recognize that they are working in this area. But they are using an electronic health record every day, or they are involved in management that's somehow related to electronic health records, or they are involved in looking at electronic health records to prepare their organization, whether it's a physician practice, a hospital, or a cancer center, they know that it is the next step. Traditionally nurses are not quite as involved in those kinds of decisions, so one of the things we are trying to share with our members is that they should be involved because a lot of the documentation will be done by them as the nurse. We hope that our focus group will grow to become a special interest group.

Last year, we also sponsored an HIT think tank. This was a great opportunity to introduce the HIT world to members of ONS. On the first day we had ONS leaders come in and talk about what was happening on the national landscape. Then the second day we spent a little more time talking about; now that we know what is happening nationally, how we can bring that in to work with oncology nurses, to help them do what they need to do. We have an Oncology Quality Collaborative, which is a group of organizations that have been participating in the formation, testing, and validation of quality measures for breast cancer during active treatment as well as



during survivorship. In these pilot sites -we had 40 individual oncology practices in the first one and 20 in the second one - informatics is an area that many of them are struggling with. They are getting an electronic health record that might not have a whole lot of information related to oncology and they are struggling with having to customize it and put together their own templates and do a lot of work before it is functional.

They are coming to us and asking for help and are all struggling with the same type of things. So we are looking at opportunities to partner, for instance with HIMSS, and the first partnership is the eNursing Informatics Institute on November 30th. Looking at what is already out there, what resources can we provide to our members, but also our customers who may not be members but have purchased products and services from us. We don't necessarily want to recreate the wheel, which is one of the reasons we came to HIMSS, because I was quite aware of the great products and services that HIMSS made available, and through partnerships like that we can make sure oncology nurses have access to that information.

4. What value do you see in ONS being an ANI member?

First I have to say that we are honored to be a part of this group and one of the most exciting pieces for us is that we are collaborating with all of these nursing organizations, even though we are all different specialties and we are doing different things. Related to informatics we have so many things in common. It is really exciting to see this unified voice and nurses helping nurses. So that has probably been the most exciting thing, that we can learn from these other organizations. So now that we are involved with ANI we have the expertise of working with many more nurse organizations toward a common goal. We are not working and living in a cocoon, we need to work with our partners that are in nursing organizations in different specialties.

5. In what way(s) is ONS supporting ANI Initiatives e.g. the [ANI Consumer Pledge](#), ANI Comments & Testimony, the Emerging Leader Program, etc?

The ANI pledge is a great example of our participation. Once we received the information we shared it with our members by posting on our web site and via email in our weekly ONS Connect. It has links to various programs, so we made sure we included that information to increase their awareness and some members were excited enough to participate.

When there are comments and testimony that are needed we can be at the table with other organizations, and then we can turn around and send that to our members with the goal to have members provide some of that testimony. I have also distributed some of the Emerging Leader information.

As the Governing Director to ANI, when I get information from ANI, I try to share the information with our leadership team and staff, but also with our members so they can see some of the things happening and how it affects what they do as an oncology nurses.

6. What is ONS's vision for the future of nursing informatics?

I think as a member driven organization, and being true to our mission and vision, we are trying to be a resource to our members. Our vision is to lead the transformation of cancer care, and part of that transformation is electronic health records and other types of HIT. Some of our members don't know where to turn and there may have been some educational opportunities at their organization during or before go-live, but some of them are saying, *"yes we learned it but we don't really understand everything, so where can we go for help?"* We can develop programs to help, and yes we do a lot of education and research, but we are also looking for how can we help members by tapping into other groups with expertise. What we see as the future is that nurses are going to be more critical to the process than they are today, particularly in oncology care. Let's take for example a patient that is receiving chemotherapy as part of their treatment; one of the things that we see is the potential for increased quality and safety that is available when you are using an electronic health record. For example, you are not looking at the handwriting, etc. but it doesn't stop there.

One of the things we see as the future is to look at the data that are being collected. We have a workgroup that is looking at oncology data elements. We don't want to recreate the wheel, we are looking at what is already out there. But we are trying to standardize them so that as nurses documenting this care, we can pull that data out and do research, looking at things like quality measures. In fact, we have developed and validated these quality measures, but we have to then ask, what do we do with them? We just met with a group from the National Quality Forum and the next step is to convert them into eMeasures so that we can make them available to oncology nurses. They can provide more information to the patient, and have that data to do meaningful research. There is so much potential for nurses and nurse informaticists that we want to be able to support what our oncology nurses are doing. But, more importantly we want to link them with resources, such as ANI, that they may not have access to in their particular organization. Whether it is education, publications, research, etc., those things can be extremely valuable and will help nurses in the long run give better patient care.

7. Additional Comments

I would like to encourage the audience to not be afraid to ask questions or jump into that next realm. It really is important for nurses to have a strong voice and be out there helping to make some of these decisions and working together in an inter-professional way, whether it's with a physician or a social worker or a pharmacist. We don't work in a vacuum, so we need to work with our colleagues, especially when designing systems or once the electronic health record is deployed. That is only the first step, so don't be afraid to ask questions and reach out and look for resources that are perhaps outside your comfort zone. It's good to be curious and rely on one another to learn the things that you don't know.

Biography for Elizabeth Wertz Evans

Liz brings an extensive healthcare background, a notable education, and diverse professional experience in clinical and operational aspects of healthcare to her role as Executive Director of Professional Practice and Programs for the Oncology Nursing Society. She currently leads ONS's division that oversees

education, publishing, research, library/archives, international initiatives, and grant funding. Her career has focused on patient safety and quality, health information technology, practice management, financial management, strategic planning, joint ventures, publishing, education, and training.

Liz is a Fellow of the Healthcare Information and Management Systems Society (HIMSS) as well as a member of the Board of Directors and chairperson for the Professional Development Committee for the Western Pennsylvania chapter of HIMSS. A Certified Professional in Health Information Management (CPHIMS) through HIMSS, she is also a member of the following national HIMSS groups: Nursing Informatics Committee, National Quality Forum Task Force, and a previous member of the Quality Outcomes Committee. Liz is also a member of the Medical Group Management Association's (MGMA) Leadership Team for the Assembly of Oncology Hematology Administrators (AOHA) and previously served on the national Board of Directors, Executive Committee, and as the Chairperson for the Ethics Committee. She is a founding member of MGMA's Patient Safety and Quality Advisory Committee and Leadership Trainers. She is also a Certified Professional in Healthcare Quality (CPHQ) through the National Association for Healthcare Quality and a Fellow of the American College of Medical Practice Executives (FACMPE).

To further develop this blended experience, Liz is completing her doctoral degree through Capella University. Her research is focusing on the role of technostress as related to oncology nurses using an electronic health record (EHR) and what effect it might have on the quality, safety, and effectiveness of health care for patients with cancer.

Recorded: October 25, 2012

For full interview recording you can [click here](#) or visit <http://www.allianceni.org/members.asp>