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The British Columbia Patient Navigation Model: A Critical Analysis

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Patient navigation programs have become a ubiquitous approach to facilitate accessibility to appropriate oncology healthcare and supportive services. Although many facilities have implemented navigation programs, a lack of published, theory-guided, evidence-based research has led to misinterpretations of navigation and a lowered sense of credibility. As a result, this article will provide a summary and critical evaluation of the British Columbia Patient Navigation Model (BCPNM). The analysis of the model will consider the philosophical perspective, including its contribution to nursing knowledge, research, and application to practice. In addition, the evaluation will discuss the model's ease of use and understanding of its identified concepts.

Framework for the Analysis

The BCPNM is a practical model developed from a psychosocial perspective, aimed at capturing the essence of the patient navigator role. Two frameworks were chosen for the analysis of the BCPNM: the Synthesized Method of Theory Evaluation (McEwen & Wills, 2007) and the Criterion Based Critique (Johnson & Webber, 2005). The Synthesized Method of Theory Evaluation was selected for its simplicity and practicality. The framework was designed specifically to critique middle range and practice theories, which provided further motivation for choosing this method (McEwen & Wills, 2007). The Synthesized Method is divided into three essential components: theory description, theory analysis, and theory evaluation. The criteria specified under each component were designed by integrating other nursing theorists' frameworks. McEwen and Wills (2007) described the method as "contemporary and responsive to both recent and anticipated changes in use of theory in nursing practice, research, education, and administration" (p. 109). The BCPNM is a recent, contemporary model that lends itself to the possibility of change caused by the continuous evolution of healthcare service programming and delivery.

Purpose/Objectives: To provide a critical analysis of a patient navigation model using the Synthesized Method of Theory Evaluation and the Criterion-Based Critique as frameworks for the analysis.

Data Sources: English-language research and clinical articles and Internet sources (CINAHL®, PubMed, and Google™ Scholar) on patient navigation up to April 2009.

Data Synthesis: The British Columbia Patient Navigation Model (BCPNM) is a practical model developed from a psychosocial perspective. The BCPNM highlights the functions of the navigator for patients with cancer and is patient and family centered.

Conclusions: The BCPNM provides a comprehensive framework for current patient navigation programs and can facilitate the development of future models.

Implications for Nursing: The BCPNM is a useful model for nursing practice because it identifies and clearly highlights numerous functions that nurses provide. The model can serve as a guide for nurses who provide psychosocial interventions in a variety of oncology environments.

The second framework chosen for this analysis was the Criterion Based Critique because it can be used for non-nursing theory evaluation and can further expand the usefulness of the model for nursing practice (Johnson & Webber, 2005). The BCPNM was developed in 2007; a review of numerous databases, including CINAHL®, PubMed, and MEDLINE®, revealed no literature critiquing the proposed model. Critiquing and appraisal of the BCPNM will be guided by the two chosen frameworks, past patient navigation literature, and interpretations of the model.

Model Description

The topic of patient navigation has generated a groundswell of activity as many healthcare programs strive to provide efficient, streamlined care while acknowledging consumer satisfaction. The psychosocial impact of cancer is multifaceted for patients and their families, who often require a constellation of