Shared Decision Making: Empowering the Bedside Nurse

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Shared decision making is a process that has empowered specialty nurses at the Mayo Clinic in Rochester, MN, to solve a practice concern. Staff nurses recognized a lack of concise, collated information available that described what nurses need to know when caring for patients receiving chemotherapy. Many aspects of the administration process were knowledge and experience based and not easily retrievable. The Hematology/Oncology/Blood and Marrow Transplant Clinical Practice Committee identified this as a significant practice issue. Ideas were brainstormed regarding how to make the information available to nursing colleagues. The Chemotherapy Yellow Pages is a resource that was developed to facilitate the rapid retrieval of pertinent information for bedside nurses. The content of this article outlines a model of shared decision making and the processes used to address and resolve the practice concern. Through the power of shared decision making, nurses are able to use their voices to directly impact professional practice in daily patient care.

The mission of the authors’ facility, the Mayo Clinic in Rochester, MN, is to “provide the best care to every patient every day through integrated clinical practice, education and research” (Mayo Clinic, n.d.). The development of shared decision making, which emphasizes accountability for nursing practice, became one of the vital components for the process of strategic planning. The model of shared decision making provides staff nurses with an active role in the process of making decisions, forming policies, and influencing actions and behaviors that affect their professional practice. When shared decision making is used, communication is fluid among all organizational levels and is facilitated, not controlled, by management. (Neis & Kingdon, 1990).

Every nurse at the authors’ facility is expected to understand the shared decision-making process, and the model is included in the formal orientation process. Nurse leaders encourage the process as decisions are made throughout the Department of Nursing. One important facet of shared decision making in the Department of Nursing was conceptualized and operationalized through the formation of specialty nursing practice committees. The Hematology/Oncology/Blood and Marrow Transplant (Hem/Onc/BMT) Clinical Practice Committee is one example. The committee consists of a member of the Hem/Onc/BMT Nursing Leadership Committee, a clinical nurse specialist, and a staff RN representative from the hematology, medical oncology, blood and marrow transplant units, and float staff. Participation on the committee is on a volunteer basis with support from each nurse manager. A representative from the infusion therapy department and a continuous improvement specialist serve as ad hoc members. The functions of the specialty practice committee include providing coordination and guidance in the specialty area and promoting a framework for decision making that places patients’ needs first (Hem/Onc/BMT Clinical Practice Committee, n.d.).

The staff resource, titled the Chemotherapy Yellow Pages, was the result of brainstorming by the committee in an effort to resolve a practice concern. Although many books are available regarding a multitude of cytotoxic agents, they often are cumbersome and difficult to reference. In addition, experienced Hem/Onc/BMT nurses had...
valuable knowledge from which novice nurses could benefit. The committee’s goal was to compile the information found in the literature and combine it with the knowledge of experienced nurses to create an easy-to-follow resource.

The committee knew that the resource had to be clear and concise for quick referencing. Float staff, novice nurses, and other nurses outside the Hem/Onc/BMT specialty would benefit by using the Chemotherapy Yellow Pages, so the resource had to be user-friendly for nurses without specialty training. The format was chosen by the committee to include protocol names, chemotherapy agents, administration routes, medication toxicities, and significant nursing considerations (see Figure 1). The categories were chosen to identify the key components outlining specific chemotherapy protocols. To keep information concise, the committee limited entries for each protocol to one page when possible. The committee selected 19 of the most commonly used adult hematology and oncology non-study treatment protocols identified by staff nurses. A disclosure was written, stating that the pages were recommended nursing considerations based on practice and research, not a set of rigid rules. The considerations were recognized not to be appropriate for every situation; nursing and physician judgment should be used to meet patient needs. For the purpose of this article, protocols are defined as established non-clinical trial chemotherapy regimens.

The selected protocols were divided among the committee members according to their practice areas. The members were assigned to develop the pages based on research. The research included clinical journals, books, a pharmaceutical database, and discussions with experienced specialty nurses. The Hem/Onc/BMT Clinical Practice Committee reviewed the drafts and made recommendations at each monthly meeting. The process continued for about one year. Upon approval, the content was forwarded to the specialty pharmacy coordinator. The next four months were spent modifying the pages based on pharmacy recommendations. The format then was evaluated to ensure consistency among the selected protocols. Prior to implementation, specialty staff nurses and individuals in nursing leadership reviewed the content. With positive feedback, the committee decided to proceed.

The next step was to educate the staff about the resource. A poster presentation was created and displayed on each nursing unit as well as at an annual nursing poster fair. Nurses and allied healthcare providers throughout the facility attended the poster fair. The Chemotherapy Yellow Pages and poster also were displayed at the annual specialty competency sessions organized by the Hem/Onc/BMT Staff Education Committee. A learning tool to enhance content awareness was incorporated into the competency session. A binder containing five copies of each yellow page was placed on every specialty nursing unit. This enabled nurses to remove a copy of the protocol and place it into a patient’s plan of care. Additional copies and management of the binder are completed by committee members. Included in the binder was a form for staff nurses to complete with any questions, updates, or recommendations for new chemotherapy protocols. Submitted forms are returned to the Hem/Onc/BMT Clinical Practice Committee for consideration.

The same information and education that were presented to the specialty staff were presented at the Float Specialty Practice Committee meeting. Each nursing unit has a float guideline that provides information about the type of unit as well as commonly used procedures and practices. Each Hem/Onc/BMT Clinical Practice Committee member was responsible for including information regarding the Chemotherapy Yellow Pages on each unit’s float guideline to ensure that nurses outside of the specialty were aware of the resource. Although nurses outside the specialty are not expected to administer chemotherapy, the yellow pages provide information related to side effects and nursing considerations that are helpful in monitoring patients after chemotherapy administration.

In an effort to maintain current evidence-based practice, the committee recognized the need to review the resource. Every two years, the yellow pages are to be reviewed for content based on current physician-approved chemotherapy protocols, updated literature, and recommendations from the pharmacy. In addition to the practice changes, a recent transition to electronic charting has reaffirmed the need for ongoing evaluation. The Chemotherapy Yellow Pages previously was placed in the paper copies of nursing plans of care. With the assistance of the Hem/Onc/BMT Communications Committee, the Chemotherapy Yellow Pages is in the process of being downloaded online via an intranet system.

The Chemotherapy Yellow Pages have been well received by staff nurses. Novice nurses have acknowledged the resource as a helpful tool in guiding safe practice. Likewise, experienced nursing staff members have used the yellow pages as an enhancement to their formal chemotherapy training. Non-specialty nurses have appreciated the information relevant to patient care the yellow pages provide in the Hem/Onc/BMT units.

In the ever-changing hospital environment, nurses are accountable for maintaining consistent, patient-centered nursing care. The Chemotherapy Yellow Pages was developed by nurses to deliver a concise, evidence-based chemotherapy resource for nursing practice at their facility. As the profession evolves further and new issues arise, nurses will continue to promote the framework for decision making that places the needs of patients first.

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References
Rapid Recap

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- The shared decision-making process allows staff nurses to impact professional practice at the bedside.
- Through a shared decision-making model, the Hematology/Oncology/Blood and Marrow Transplant Clinical Practice Committee was able to identify a nursing concern, resolve the need, and establish a method to maintain a current evidence-based resource.
- The *Chemotherapy Yellow Pages* was created to provide a clear, concise reference for nurses when caring for patients receiving chemotherapy.

Bibliography

