Nonspecialty Nurse Education

Evaluation of the Oncology Intensives Initiative, an oncology curriculum to improve patient care

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BACKGROUND: A community hospital combined its medical and surgical patients with cancer on one unit, which resulted in nurses not trained in oncology caring for this patient population.

OBJECTIVES: The Oncology Intensives Initiative (ONCiI) involved the (a) design and implementation of a daylong didactic boot camp class and a four-hour simulation session and (b) the examination of nurses’ worries, attitudes, self-efficacy, and perception of interdisciplinary teamwork.

METHODS: A two-group, pre-/post-test design was implemented. Group 1 consisted of nurses who attended the didactic boot camp classes alone, whereas group 2 was comprised of nurses who attended the didactic boot camp classes and the simulation sessions.

FINDINGS: Results of data analysis showed a decrease in worries and an increase in positive attitudes toward chemotherapy administration in both groups, as well as an increase in self-efficacy among members of group 2.

KEYWORDS
oncology; nurse; education; simulation; quality improvement

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EXPERIENCING A GROWING NUMBER OF PATIENTS, clinical staff at Duke Raleigh Hospital (DRH), a 189-bed hospital in North Carolina, must manage two patients per room to accommodate the increased volume of inpatients on the medical-surgical floors. Hospital administration determined that quality nursing care of patients with cancer was at risk because of the two-patient requirement in each room (e.g., neutropenic patients were exposed to an increased risk for infection). To address the needs of the hospital and of this specialized population, the patients with cancer were moved to private rooms on the surgical floor. This move also served to centralize oncologic care by placing medical and surgical patients with cancer in one unit. One of the medical-surgical unit’s strategic goals is to foster and develop the oncology expertise of nurses with no previous oncology education, training, or experience with the recognition and management of oncologic emergencies. In addition, the medical-surgical nurses previously caring for patients with cancer had limited training and education in caring for this patient population.

The primary aim of the Oncology Intensives Initiative (ONCiI) was to design and implement a one-day boot camp and a four-hour simulation session for medical-surgical nurses caring for patients with cancer. Although the boot camp class was to consist of didactic content, the simulation session was intended to be made up of exercises leading nurses through chemotherapy administration and recognition of early and late signs of oncologic emergencies. The simulation would also incorporate the Situation, Background, Assessment, Recommendation (SBAR) technique for communicating key information to the care team, callout for providing status updates to the care team, and check-back for offering closed loop communication among team members, all from the Agency for Healthcare Research and Quality’s TeamSTEPPS (Team Strategies and Tools to Enhance Performance and Patient Safety). A secondary aim of ONCiI was to examine nurses’ worries, attitudes, self-efficacy, and perception of teamwork across the interdisciplinary team while caring for patients with cancer, both before and after participation in the didactic boot camp classes and in the didactic boot camp classes and the simulation sessions.