

CJON WRITING MENTORSHIP PROGRAM PAPER

Introduction of Novice Oncology Nurses to End-of-Life Care

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Dying patients and their families often have unique physical, psychosocial, social, and spiritual needs that require specialized end-of-life (EOL) skills. EOL preparation of nurses has been inconsistent. Novice nurses need guidance to develop the knowledge, clinical skills, and coping strategies to provide high-quality and compassionate EOL care. Inadequate preparation for providing EOL care can lead to anxiety, stress, and burnout. Barriers that prevent adequate preparation and support of novice nurses in EOL care include lack of education, financial constraints, poor staffing, and major life changes. However, opportunities are available to support novice oncology nurses as they develop the skills necessary to provide competent EOL care. Nurse extern programs and individually tailored orientation plans that include EOL care should be developed. Careful selection of mentors and preceptors is an important aspect in planning orientation for novice oncology nurses. The presence of peers experienced in EOL care is crucial. Educational materials, standards of practice, and continuing education on EOL care should be available to novice nurses as well. EOL competencies may provide a blueprint to help with performance evaluations. Adequate preparation of novice oncology nurses for EOL care will improve patient outcomes, increase job satisfaction, and promote longevity in the specialty.

Until recently, most Americans died at home and were cared for by family and friends (Last Acts, 2002). Mortality most often was associated with infections, accidents, and advanced diseases (Lynn, 2004). Advances in technology and improved treatment have led to longer life expectancies. Now, chronic illnesses (e.g., heart disease, stroke, lung disease, cancer) are the most common causes of death in the United States (Field & Cassel, 1998). Although most Americans prefer to die at home, a recent Gallop poll indicated that only 20% achieved that goal (Center for Gerontology and Health Care Research, Brown University School of Medicine, 2000). Because so many people die in hospitals or other inpatient facilities, nurses are uniquely positioned to provide good end-of-life (EOL) care.

The Importance of Nurses in End-of-Life Care

The need for high-quality EOL care will increase steadily as the U.S. population ages. Nurses consistently have been at the forefront of efforts to improve quality of life for patients and their families throughout the illness trajectory (Benoliel, 2005). As a result of nurses' efforts, the public has come to trust nurses to provide accurate information about health care. That trust was evident in a public opinion poll commissioned by *Nurse Week/Health Week* and Sigma Theta Tau International (Gray, 1999). The results indicated that 92% of the American public trusted health-care information that was provided to them by RNs.

At a Glance

- ◆ Nurses are uniquely positioned to provide high-quality end-of-life (EOL) care.
- ◆ Novice oncology nurses who are not adequately prepared to provide EOL care may experience burnout.
- ◆ Clinical mentors can help to improve novice nurses' ability to cope with EOL care.

Maintaining trust while providing patients and families with physical, emotional, and spiritual support during prolonged illness can be very challenging for nurses. This is especially true for oncology nurses provide care for patients and families along the illness trajectory from diagnosis to death.

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