Role Development in Radiation Oncology

Saturday, May 19 • 9:45–11 am

Note one action you’ll take after attending this session: __________________________________________
________________________________________________________________________________

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Key Session Takeaways

1. Radiation oncology nursing is rooted in a historical journey. Our past informs the present and will secure our future. Early roles are focused on clinical trends, symptom management, and the acceptance of radiation oncology as a major treatment modality.

2. Contemporary radiation oncology nursing is based on clinical trends, support for MDTs, structured delivery systems, and supportive evidence to measure success. An emphasis on data acquisition will provide proof to drive shared decision making and secure roles of radiation oncology nurses.

3. The future is focused on clinical excellence, prioritizing patient care, shared decision making, sustainable change, and ensuring MDT models of care. Knowledge of current literature with a focus on EBP will support radiation oncology nursing practice.
Role Development in Radiation Oncology

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DISCLOSURES

No additional disclosures.
HISTORICAL OVERVIEW

- First initiatives
- How and when specialty formed
- Initial practice paradigm
- Defining patient management
- Construct of clinical sites

HISTORICAL JOURNEY

- Informs
- Secures

Past

Present

Future

HISTORICAL JOURNEY

- Specialization circa.1970's
- Early practice models
- Ad Hoc
- ONS RT SIG 1989
ROLE DEVELOPMENT

THE EARLY YEARS

Clinical  Demystifying RT  Assembling team  Developing documentation systems

IDENTIFY CLINICAL PARADIGMS

- Professional education
- Patient/family education
- Symptom management
- Documentation
ROLE DEVELOPMENT

RALLY SUPPORT FOR MDT

- RT Team Foundation
- Acquire Data
- Aim for complete buy-in

ROLE DEVELOPMENT

CONCEPT & STRUCTURE

- Define need
- Assess viability
- Present across disciplines
- Flexible Model

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ROLE DEVELOPMENT

SUPPORTIVE EVIDENCE

Where is it?
Create it!
RIP essential stuff
Knowledge of viable literature
Access to search and applicability

Listen intensely
Read

ROLE DEVELOPMENT

MEASURE SUCCESS

Does RT Nurse affect outcomes?
Plan in place
Evaluation tools
dovetail with QA
Invoke administrative support

CONTEMPORARY ROLES

Impact of MDT hierarchies

Where is it?
Shake hands with RT MDT
EXPLORING PRACTICE DOMAINS

LITERATURE SEARCH
Nursing role
Interprofessional relations
Hierarchy
Multidisciplinary team
Communication
Organizational culture
Health personnel attitude
Public relations
Professionalism
Professional role evaluation
Role delineation
Job analysis
Organization and management
Organizational climate

Nurse physician relations
Physician nurse relations
Radiation oncology
Radiation oncology nursing
Patient care teams
Interdisciplinary health teams
Oncology nursing
Cancer center
Oncology services
Radiation oncologist
Professional role
Organizational culture
Administrative
Cancer hospital

LITERATURE THEMES
CNS fundamental (Anderson, 2014)
Non APN staff integral (Barber, 2016)
ONN: RDS did not indicate certification path (Lubejko, 2017)
ONN: Novice group core competencies (McMullen, 2016)
Clinical Trial Nurses: EB model multidimensional role (Pardom, 2017)
ONN most prevalent studied (Becze, 2017; Brown, 2013; Cook, 2013, Haybeck, 2013)
LITERATURE

Role Delineation:
- ONN/Clinical
- Trial/CNS
- Traditional
- Innovative

Nurse Scientist

APN roles lack clarity

CNS transformative potential

RT APN improves safety culture

ELEMENTS OF PROFESSIONAL RT NURSING MODEL

- Determine practice setting
- Patient population
- Available RT treatment
- MDT present
- Referral patterns
- Schedule of operation
- Insurance regulations

RT NURSING MODEL

Education
- RN/BSN
- Certification (OCN®)

Scope of Practice
- assessment
- education
- symptom management
- research coordination
- counseling
- long-term follow-up
- leadership initiatives
RT APN MODEL

Clinical Nurse Specialist

- RN role
- Scope of Practice:
  - Clinician
  - Site-specific practice coordination
  - Educator
  - Mentor
  - Consultant
  - Research

Nurse Practitioner

- RN MSN NP
- Certification (AOCNP®)
- Scope of Practice:
  - Collaborative with Radiation Oncologist
  - NP competencies
  - Physiologic assessment
  - Patient care along trajectory
  - Long-term follow-up reimbursable
  - Survivorship focus
  - End-of-life care
  - Rehabilitation
  - Research

RT NURSING

Additional Considerations:
- Required staff (ACRO guidelines)
- Direct patient care hours
- Ancillary hours
- Practice model
- Collaborative/Primary clinical

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RT NURSING
Position descriptions

- based on framework
- scope of practice
- reporting structure
- educational requirements
- knowledge, skills, abilities
- responsibilities
- leadership

EDUCATOR

Plan Educational Opportunities
- assess staff needs
- establish objectives
- develop outline
- content
- innovative presentation style
- include MDT evaluation tools

MDT CHAMPION

- leadership
- collaboration
- communication
- interdisciplinary
- expertise
FOCUS ON COLLABORATION

Identify and solve
Team builder of collaborative practice
Interdepartmental
Who does what?
Who has information?
Who knows what to do with this knowledge?
Who can do it?

COMMITTED TO QUALITY CARE

Standards
Structure standards
Process standards
• policies
• procedures
• protocols
Outcome standards
Continuous performance improvement
Documentation

DIMENSIONS OF QUALITY CARE

Patient education
Professional education
Research based practice
Knowledge of clinical trials/availability
LEADER

- Every Nurse has leadership potential
- Articulate leadership characteristics
- Knowledge of leadership models
- ONS leadership resources

FUTURE GOALS AND BEYOND

- Goal
- Clinical excellence
- Patient above everything
- Shared decision making
- Sustainable change
- Ideal MDT philosophy
- Know current environment
- Initiate EBP
- Creative modeling
- Develop focused collegial exchange

WHAT IS OUR CHALLENGE?

- Consider RDS
- Literature review
- Study/Reflect/Write
- Construct modeling
- Develop focused collegial exchange