Geriatric Oncology: Educating Nurses to Improve Quality Care

Carolina Uranga, MSN, AGCNS-BC, RN-BN, OCN
City of Hope
Clinical Nurse Specialist

NIH Award 1R25CA183723-01A1

Introduction to Goal Implementation

- Goal implementation plans
  - Implementation plan template
  - What do you want to add or change?
  - Evolve as you learn

Your Charge

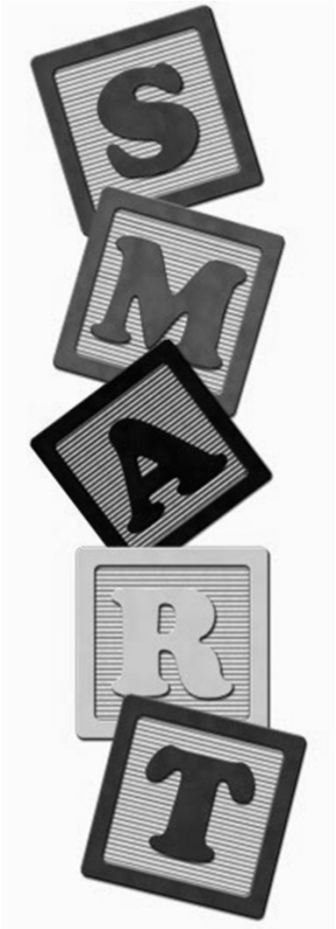
- To integrate geriatric specific activities into your practice
- To improve geriatric care in your setting

Our Charge

- To provide you with support and resources to help you meet your goals
- To gather outcome data from information collected which describes activities in geriatric care being provided by participants across the nation

Goal Implementation

- Goals: SMART
  - Specific and strategic
  - Measureable
  - Attainable/acheivable
  - Relevant/realistic
  - Time-bound
- Complete Goal Template



Goal Template

2019 Geriatric Oncology: Educating Nurses to Improve Quality Care

Institution:_____ **City & State:**_____

Names: 1)_____

2)_____

3)_____

Please Print Clearly

Email Reminders will be sent for Online Post Course Goals and Team Follow Up:

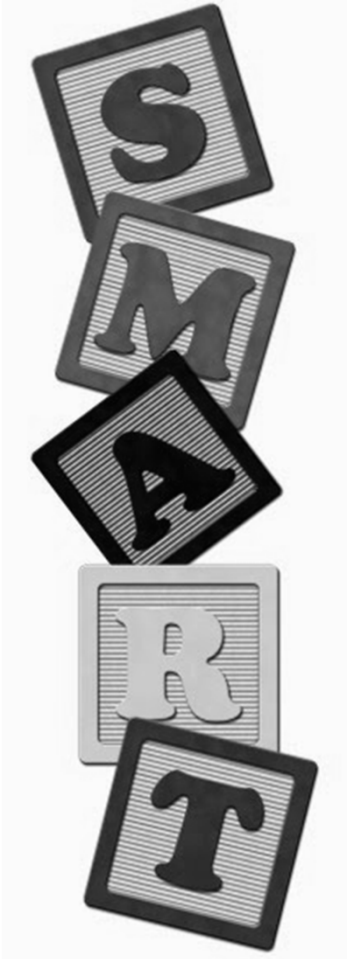
- 6 Months (Due Aug 1, 2019)
- 12 Months (Due Feb 1, 2020)
- 18 Months (Due Aug 1, 2020)

Goal 1	

Goal 2	

SMART…

- Strategic and Specific
  - What would be seen as a “success” that matters?
  - Who will do what, with or for whom?
- Measurable
  - Is it measurable and can we measure it?
  - Are there existing measures we can use?
- Achievable/Attainable
  - Can we get it done with the resources and time that we have?



…SMART Goals…

- Relevant/realistic
  - What barriers do you anticipate and how will you address them? Competing priorities? Limited time? Limited energy?
- Results-Based
  - Learn more when you have a results focused goal
  - What was learned?
  - What improved?

…Smart Goals

- Time-bound
  - What can we accomplish:
    - By next Tuesday?
    - Within six months?
    - In one year?
    - Does the timing make sense in the setting?

Important to hold yourself accountable

Year 3: Example of Goals (Education)

- We will create education about geriatric oncology on ways to improve quality of care in this population within the next 3 months.
- (SMART?)
- We will implement the geriatric oncology education to the staff on the inpatient oncology units within the next 6 months and evaluate quality metrics (fall, LOS) approximately 3 months after the completion of the education.
- (SMART?)
- Perform a RN needs assessment on 2 inpatient units (Hematology/ Oncology & Bone marrow Transplant) using survey methods to identify knowledge gaps in geriatric/gerontologic oncology nursing. 3-6 months.
- (SMART?)

Year 3: Example of Goals (Practice)

- Develop a polypharmacy review program for patients >70 yrs old in the inpatient Oncology unit, outpatient infusion, and outpatient radiation therapy areas.
- (SMART?)
- Each patient >65 y.o. will have Edmonton (ESAS) intake form and G8 Assessment at each new patient appt. Timeline 2/2019.
- (SMART?)
- Maintain patient safety by assessing functional status using TUAG on new chemotherapy patients > 65 years old. Timeline 6 months. Plan to repeat q 3 months x 1 year. Will refer to PT/OT as needed. Will access evaluation by tracking falls.
- (SMART?)
- By July 2019 the outpatient infusion center will perform the Lawton Instrumental Activities of Daily Living Scale to be performed at Day 1 of each treatment cycle for pt's 65 yo or greater.
- (SMART?)

Examples of goals:

- Within 6 months I will present an overview of physiologic changes and comorbidities associated with aging to the general nursing staff.
- Will develop a protocol to add geriatric assessment parameters to admission assessment for all patients 70 years and older within 12 months. This will include: function, nutrition, cognition, social support, comorbidity, and psychological state upon admission.
- Will coordinate an interdisciplinary team to review cases of oncology patients 75 years and older to evaluate needs and resources available to improve their care by 12 months.
- We will pilot the use of a chemotherapy toxicity predictive plan for patients 70 years and older who are anticipated to receive chemotherapy.
- Will provide a Timed-Up-and-Go (TUG) to all inpatient admissions for patients 70 years or older to assess functional status and fall risk within 12 months

Actual Team Goals

Goal 1	In next 6 months (by Dec. 30 2017) provide geriatric oncology specific education to our OCM (Oncology Care Model) Care Coordinators.	
	6-Month	Complete ☒ *In process ☐ **Stalled ☐ ***Stopped/Canceled ☐ Never started ☐
Original ☐ Revised ☐	**Provided initial education on the Chemotherapy Toxicity Calculator and use of the Edmonton Symptom Assessment Score (ESAS) to assess symptom burden in high risk patients to all Oncology Care Model Care Coordinators.** **Barriers:**	
	12-Month	Complete ☒ *In process ☐ **Stalled ☐ ***Stopped/Canceled ☐ Never started ☐
Original ☐ Revised ☐	**Provided education on a revised ESAS flowsheet in EPIC to include additional questions to support workflow.** **Barriers:**	
	18-Months	
Original ☐ Revised ☐	**No 18 month goal for education** **Optimized ESAS tool based on end user feedback.** **Barriers:**	Complete ☒ *In process ☐ **Stalled ☐ ***Stopped/Canceled ☐ Never started ☐

Goal 3	By October 31st we will implement a bedtime and/or sleep promotion routine for our in-patient unit to help improve sleep quality.	
Original ☒ Revised ☐	**6-Month** Staff meetings/education held, sleep cart developed and pm care routine implemented. Well received by patients. **Barriers:** Staffing, inconsistent staff (NAs) sent to unit	Complete ☐ *In process ☒ **Stalled ☐ ***Stopped/Canceled ☐ Never started ☐
Original ☒ Revised ☐	**12-Month** Initiative continues to be well received by patients and the Press Ganey CAHPS related to sleep environment have improved by ten percentiles from August, 2017 to July, 2018. **Barriers:** Ongoing need for information and education on this initiative due to inconsistent nursing assistants assigned to the unit and nurses transferring off the night shift.	Complete ☐ *In process ☒ **Stalled ☐ ***Stopped/Canceled ☐ Never started ☐
Original ☐ Revised ☐	**18-Month** One of the attendees to the Geriatric Oncology: Educating Nurses to Improve Quality Care program has brought the initiative to the nurses shared governance research council and is working with another unit to develop a research project. There has been a sharing of information with successes and challenges to formulate a solid research initiative. **Barriers:** The need for information and education on this initiative continues due to inconsistent nursing assistants assigned to the unit and nurses transferring off the night shift.	Complete ☒ *In process ☐ **Stalled ☐ ***Stopped/Canceled ☐ Never started ☐

Goal 3	Within 6 months, we will deliver a nutritional assessment to all patients > 65 years old and provide resources and referrals to nutritional services as indicated.	
Original ☒ Revised ☐	**6-Month** Starting Dec 1, 2017 the MNA has been given to all new patients to the Oncology clinic age 65 and older and a workflow is in place for referring patients to dieticians. **Barriers:**	Complete ☒ *In process ☐ **Stalled ☐ ***Stopped/Canceled ☐ Never started ☐
	12-Month	
Original ☒ Revised ☐	We continue to screen and refer at risk pt's to RDs for nutritional counseling. We have secured a grant through the SD DOH to help fund an additional RD position to assist with the influx of referrals. Also, the Sanford system is in the process of developing a workflow to screen all cancer patients, regardless of age, for risk of malnutrition. Barriers: Faculty, financial: grant application approved to assist with funding an FTE in the dietary dept.	Complete ☒ *In process ☐ **Stalled ☐ ***Stopped/Canceled ☐ Never started ☐
	18-Month	
Original ☒ Revised ☐	Due to the work completed on this project, our Cancer Center was able to secure a state DOH grant that funds a full time Registered Dietician that resides in the Oncology Clinic. All patients, regardless of age, are now screened and referred to a dietician as indicated and is usually available to meet with the patient same day. We have worked with IT to include the screening form in the nurses documentation when rooming.	Complete ☒ *In process ☐ **Stalled ☐ ***Stopped/Canceled ☐ Never started ☐

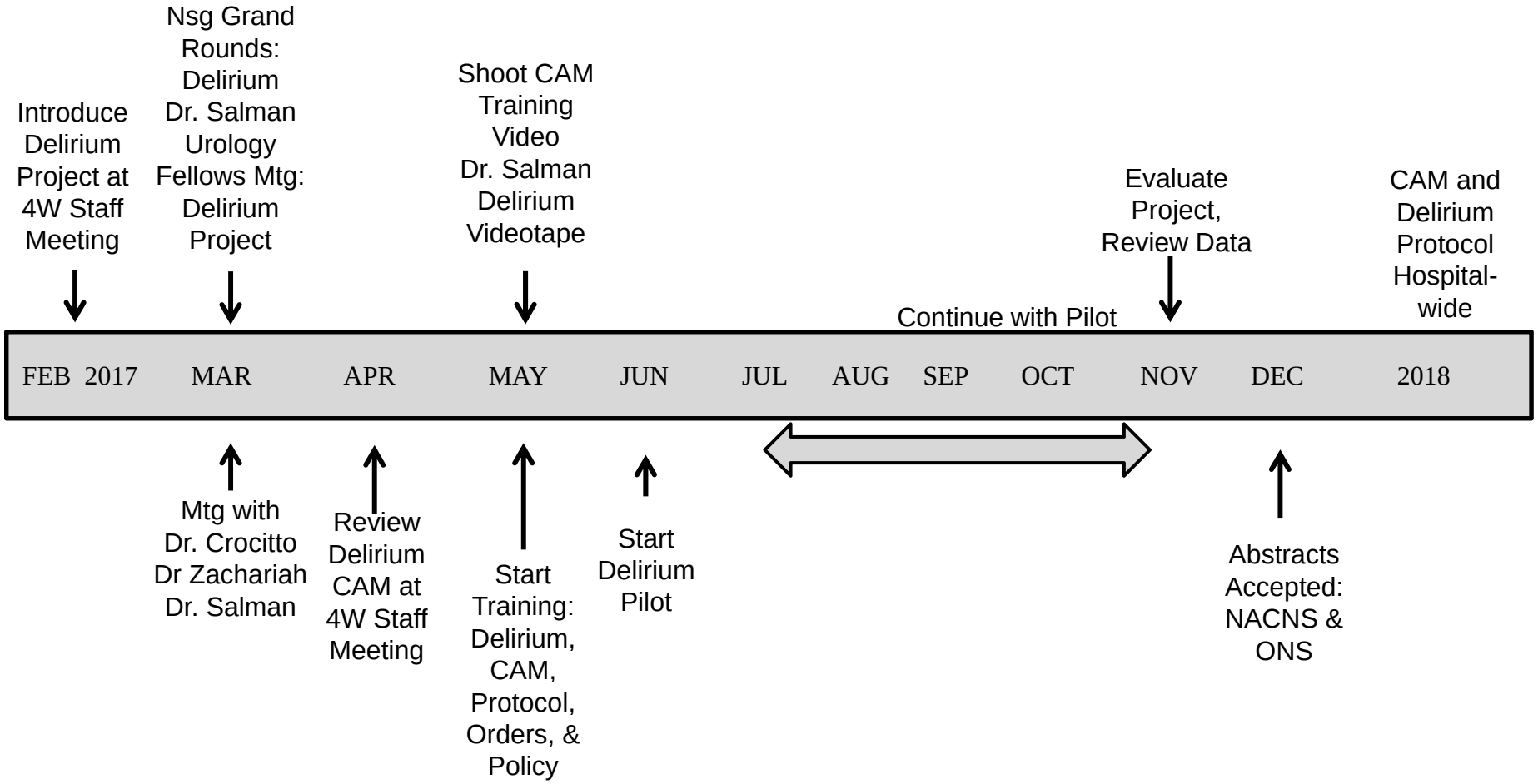
Patient Outcomes

- How will your goal improve your patient outcomes in your organization?
  - Test your goals by asking the “ SO WHAT” question.

Project Framework

- Identify your stakeholders/decision makers early
- Current Process – Outline objectives
- Identify Outcomes – Reassess if not achieved
- Proposed/recommended process
  - Identify changes – impacted area(s)
- Timeline
  - Deliverables (measurable steps)
- Final deadline
- Evaluate your process
- Sustainability
- Meet regularly to stay on track

Example: Urology Delirium 4W Project Timeline



Online Project Tools

- Airtable
  - https://airtable.com/
  - Has database, spreadsheet capabilities to organize your projects
- Basecamp
  - https://basecamp.com/
  - Organizes your projects and communication with your team.

Evaluation Process

- Email reminders will be sent at 6, 12, and 18 months
- Online Post Course Goal and Team follow ups at 6, 12 and 18 months

Summary

- Past participant panel this afternoon
- Faculty support for goal development this afternoon
- Evaluations will be due at 6, 12, and 18 months
- Follow up phone calls at 6, 12, and 18

Welcome to Year 3 Participants!

Share their goals and progress

- Ashley White, BSN, RN
  - Nebraska Cancer Specialists
- Nimian Bauder, MSN, AGCNS, RN
  - VA Long Beach CLC, Long Beach, California

End of Day 1 Evaluation

- Complete today's evaluation
  - Receive a raffle ticket
  - Prize drawing in the morning

Go to Old Town Pasadena

Enjoy your evening!