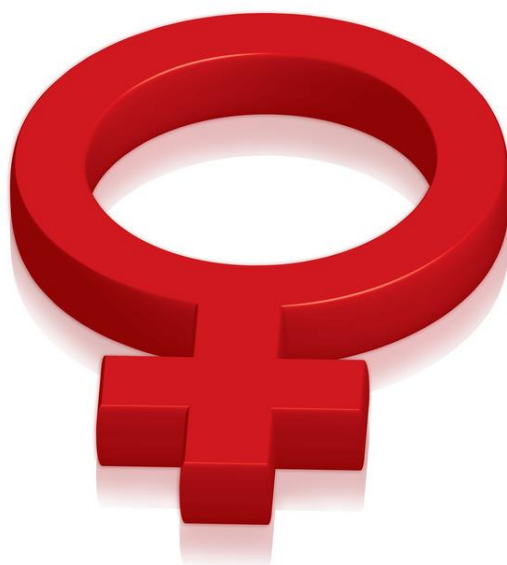


Gynaecology Oncology Nurses Evidence Update

November 2017
(Quarterly)



Respecting everyone
Embracing change
Recognising success
Working together
Our hospitals.



Training Calendar 2017

All sessions last one hour

November (13.00)

2nd Thu	Literature Searching
10th Fri	Critical Appraisal
13th Mon	Statistics
21st Tues	Literature Searching
29th Wed	Critical Appraisal

December (12.00)

7th Thu	Statistics
15th Fri	Literature Searching

Your Outreach Librarian – **Helen Pullen**

Whatever your information needs, the library is here to help. Just email us at library@uhbristol.nhs.uk

Outreach: Your Outreach Librarian can help facilitate evidence-based practice for all in the team, as well as assisting with academic study and research. We also offer one-to-one or small group training in **literature searching, critical appraisal and medical statistics**. Get in touch: library@uhbristol.nhs.uk

Literature searching: We provide a literature searching service for any library member. For those embarking on their own research it is advisable to book some time with one of the librarians for a one-to-one session where we can guide you through the process of creating a well-focused literature research. Please email requests to library@uhbristol.nhs.uk

Journals: Current Contents Tables

Click on the hyperlinked title (+ Ctrl) to access the latest contents table for each journal. If you would like any of the papers in full text then please email the library: library@uhbristol.nhs.uk

Journal	Month/ Year	Volume	Issue
Cancer Nursing	November/ December 2017	40	6
European Journal of Oncology Nursing	October 2017	30	-
Seminars in Oncology Nursing	November 2017	33	4
Canadian Oncology Nursing Journal	2017	27	4
Cancer Nursing Practice	October 10 2017	16	8
Clinical Journal of Oncology Nursing	October 2017	21	5
Oncology Nursing Forum	November 2017	44	6



**UpToDate[®] is now available as a
Mobile App, free for all UHBristol staff**



Interested in staying up to date?

**Sign up at the Library, or email:
library@uhbristol.nhs.uk**

University Hospitals Bristol 
NHS Foundation Trust

Recent Database Articles

If you would like any of the articles in full text, or if you would like a more focused search on your own topic, please contact us: library@bristol.nhs.uk

Gynaecology Oncology
Nurse Cancer Training OR Nurse Cancer Education
Cancer AND Sexual Impact
Clinical Nurse Specialists

1. The Experiences of Specialist Nurses Working Within the Uro-oncology Multidisciplinary Team in the United Kingdom.

Author(s): Punshon, Geoffrey; Endacott, Ruth; Aslett, Phillippa; Brocksom, Jane; Fleure, Louisa; Howdle, Felicity; Masterton, Morven; O'Connor, Anita; Swift, Adrian; Trevatt, Paul; Leary, Alison

Source: Clinical nurse specialist CNS; ; vol. 31 (no. 4); p. 210-218

Publication Type(s): Journal Article

PubMedID: 28594672

Abstract: PURPOSE United Kingdom prostate cancer nursing care is provided by a variety of urology and uro-oncology nurses. The experience of working in multidisciplinary teams (MDT) was investigated in a national study. DESIGN The study consisted of a national survey with descriptive statistics and thematic analysis. METHODS A secondary analysis of a data subset from a UK whole population survey was undertaken (n = 285) of the specialist nursing workforce and the services they provide. Data were collected on the experience of working in the MDT. RESULTS Forty-five percent of the respondents felt that they worked in a functional MDT, 12% felt that they worked in a dysfunctional MDT, and 3.5% found the MDT meeting intimidating. Furthermore, 34% of the nurses felt that they could constructively challenge all members of the MDT in meetings. Themes emerging from open-ended questions were lack of interest in nonmedical concerns by other team members, ability to constructively challenge decisions or views within the meeting, and little opportunity for patients' wishes to be expressed. CONCLUSIONS Despite expertise and experience, nurses had a variable, often negative, experience of the MDT. It is necessary to ensure that all participants can contribute and are heard and valued. More emphasis should be given to patients' nonmedical needs.

Database: Medline

2. Orienting and Onboarding Clinical Nurse Specialists: A Process Improvement Project.

Author(s): Garcia, Mayra G; Watt, Jennifer L; Falder-Saeed, Karie; Lewis, Brennan; Patton, Lindsey

Source: Clinical nurse specialist CNS; ; vol. 31 (no. 3); p. 163-168

Publication Type(s): Journal Article

PubMedID: 28383335

Abstract: PURPOSE Clinical nurse specialists (CNSs) have a unique advanced practice role. This article describes a process useful in establishing a comprehensive orientation and onboarding program for a newly hired CNS. DESCRIPTION The project team used the National Association of Clinical Nurse

Specialists core competencies as a guide to construct a process for effectively onboarding and orienting newly hired CNSs. Standardized documents were created for the orientation process including a competency checklist, needs assessment template, and professional evaluation goals. In addition, other documents were revised to streamline the orientation process. **OUTCOME** Standardizing the onboarding and orientation process has demonstrated favorable results. As of 2016, 3 CNSs have successfully been oriented and onboarded using the new process. **CONCLUSION** Unique healthcare roles require special focus when onboarding and orienting into a healthcare system. The use of the National Association of Clinical Nurse Specialists core competencies guided the project in establishing a successful orientation and onboarding process for newly hired CNSs.

Database: Medline

3. Clinical Nurse Specialist-Driven Practice Change.

Author(s): Derby, Kelly M.; Hartung, Natalie A.; Wolf, Sherry L.; Zak, Heather L.; Evenson, Laura K.

Source: Clinical Nurse Specialist: The Journal for Advanced Nursing Practice; Nov 2017; vol. 31 (no. 6); p. 343-348

Publication Date: Nov 2017

Publication Type(s): Academic Journal

Abstract: **Purpose** The purpose of this project was to standardize vital sign (VS) monitoring throughout a patient's stay in the hospital, including at admission, following transitions to different levels of care, reassessment of abnormal VS results, daily monitoring, and before dismissal. The population of focus was adult general and progressive care patients. **Description of the Project** Standards for VS monitoring, documentation, and provider notification were established. Unit routines, nursing procedural guidelines, and order sets were updated with the new standards. Nursing staff received Web-based education. Compliance with the new standards was monitored monthly, and data were shared with nursing leadership. Leadership reviewed the data with nursing staff to identify opportunities and recognize achievements. **Outcomes** Overall, improvement in VS documentation was achieved. Continued opportunities exist for monitoring and reassessment of a full set of VSs after an abnormal result. **Conclusion** Establishing a minimum standard of VS frequency and documentation allows for all healthcare providers to trend and monitor a patient's clinical status. Variability in patient care can be diminished by establishing minimum standards of VS monitoring.

Database: CINAHL

4. Focus group interviews examining the contribution of intellectual disability clinical nurse specialists in Ireland.

Author(s): Doody, Owen; Slevin, Eamonn; Taggart, Laurence

Source: Journal of Clinical Nursing; Oct 2017; vol. 26 (no. 19/20); p. 2964-2975

Publication Date: Oct 2017

Publication Type(s): Academic Journal

Abstract: **Aims and objectives** To explore the contribution of clinical nurse specialists in intellectual disability nursing in Ireland. **Background** While clinical nurse specialists exist since the 1940s, they have only been a reality in Ireland since 2001. While the role of clinical nurse specialist has developed over the years, it still however is often seen as a complex multifaceted role that causes confusion, frustration and controversy. **Design** A exploratory qualitative approach using focus groups with Irish intellectual disability clinical nurse specialists (n = 31). **Methods** Five focus group

interviews were conducted to gather qualitative data to gain insight into the attitudes, perceptions and opinions of the participants. Data were audio-recorded, transcribed and analysed using Burnard's (Vital Notes for Nurses: Research for Evidence-Based Practice in Healthcare, 2011, Blackwell Publishing, Oxford) framework. Ethical approval was gained from the researcher's university and access granted by the national council for the professional development of nursing/midwifery in Ireland. Results The study highlights that intellectual disability clinical nurse specialists contribute to and support care delivery across a range of areas including client-focused and family-centred care, staff support, organisation support, community support and supporting other agencies. Conclusions Overall, the study shows the importance of intellectual disability clinical nurse specialists and their contribution across a range of services, care environments and the support they offer to clients/families/staff/multidisciplinary team members and outside agencies. Relevance to clinical practice Ireland is in a unique position to develop knowledge regarding specialist care for people with intellectual disability that can be shared and adapted by other healthcare professionals in other countries that do not have specialised intellectual disability nurses.

Database: CINAHL

5. Survey outlines the current characteristics of CNSs.

Author(s):

Source: AJN American Journal of Nursing; Sep 2017; vol. 117 (no. 9); p. 15-15

Publication Date: Sep 2017

Publication Type(s): Academic Journal

Abstract:The article presents survey conducted by National Association of Clinical Nurse Specialists (CNS) for 2016, which states that most CNSs are while women practicing in adult health or gerontology in acute care hospitals.

Database: CINAHL

6. Feasibility and Acceptability of the Use of Patient-Reported Outcome Measures in the Delivery of Nurse-Led, Supportive Care to Women With Cervical Cancer.

Author(s): Kotronoulas, Grigorios; O'Brien, Fran; Simpson, Mhairi F.; Maguire, Roma

Source: Clinical Nurse Specialist: The Journal for Advanced Nursing Practice; Jul 2017; vol. 31 (no. 4)

Publication Date: Jul 2017

Publication Type(s): Academic Journal

Abstract:Purpose/Aims: Patient-reported outcome measures (PROMs) can be effectively used to uncover the unmet needs of women with cervical cancer for supportive care. Our aim was to explore the feasibility and acceptability of PROM-driven, nurse-led consultations to enhance delivery of supportive care to women with cervical cancer during active anticancer treatment. Design: A 2-phased, mixed-method prospective study was conducted. Main research variables included feasibility and acceptability parameters of the trialed intervention. Methods: Preconsultation PROM data were collected during 3 consecutive monthly consultations and used by the gynecology cancers nurse specialist (CNS) to deliver personalized supportive care. The problem checklist and Cervical Cancer Concerns Questionnaire were used to aid data collection. Findings: Because of considerable recruitment challenges, a recruitment rate of 27% (3/11 patients) was achieved. Two patients completed all 3 study assessments. Seven in-clinic patient assessments were performed over 6 months. The study participants praised the opportunity for dedicated time for patients to raise concerns and for the CNS to provide sensitive and personalized support. Conclusion: Women with cervical cancer perceive important benefits from participating in PROM-driven, time-protected

sessions with their CNS. Our findings provide tentative evidence to support the feasibility and acceptability of this intervention model and warrant future confirmation. Implications for Practice: * Use of patient-reported outcome measures (PROMs) to identify the unmet needs of women with cervical cancer is acceptable and must be implemented from the point of diagnosis. * Cancer nurse specialists (CNS) are receptive to and able to act on PROM information, rendering them key professionals in addressing the supportive care needs of people with cancer. * Women with cervical cancer perceive important benefits from participating in PROM-driven, time-protected, and private sessions with their CNS.

Database: CINAHL

7. Advanced roles in cancer nursing.

Author(s): Percival, Natalie

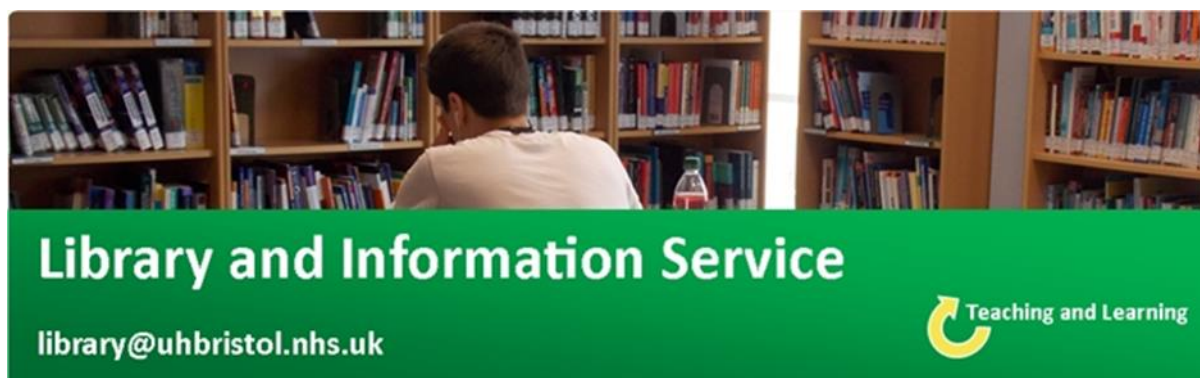
Source: British journal of nursing (Mark Allen Publishing); May 2017; vol. 26 (no. 10); p. S29

Publication Date: May 2017

Publication Type(s): Journal Article

PubMedID: 28541107

Database: Medline



Library Opening Times

Staffed hours: 8am-5pm, Monday to Friday

Swipe-card access: 7am-11pm, seven days a week

Level 5, Education and Research Centre

University Hospitals Bristol