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Staff Education for Enhancing Radiation Oncology Nurse Competency

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Walden University

College of Nursing

This is to certify that the doctoral study by

Rebecca McClelland

has been found to be complete and satisfactory in all respects,
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the review committee have been made.

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Walden University
2023

Abstract

Staff Education for Enhancing Radiation Oncology Nurse Competency

by

Rebecca McClelland

MSN, University of Phoenix, 2016

BSN, South University, 2011

Project Submitted in Fulfillment
of the Requirements for the Degree of
Doctor of Nursing Practice

Walden University

May 2023

Abstract

Treatments for cancer patients have changed over the years. Oncology nurses in areas of medical oncology and radiation oncology need to have appropriate knowledge and competence in the area in which they practice, allowing for the best outcomes. The aim of this project was to develop staff education to aid in the assurance of a newly established competency guideline designed for the radiation oncology nurse. The clinical practice question for this project explored whether education on a guideline for competency for radiation oncology nurses would enhance the knowledge and skills of these nurses within on department among a large network of cancer care sites. As recommended by the Teaching Excellence in Adult Literacy (TEAL) Center funded by agencies of the Office of Vocational and Adult Education, a learning tool for the guideline project addresses areas of self-directed learning including encouraging the willingness to learn and apply this information. An education tool was approved by an expert panel of five control team managers and three nurses from the education and radiation oncology departments. The education tool was administered to 13 radiation oncology staff (3 radiation oncology nurse managers and 10 radiation oncology nurses). The mean pretest score was 80%, and the mean posttest score was 100%. There was a 20% increase in knowledge that supported that knowledge was gained. The potential for a positive social change is anticipated through yearly competency education and evaluation. Increased competence of nurses allows for best practices for the radiation oncology nurse to foster improvements in care of the cancer patient, who can have improved quality of life.

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Dedication

This DNP project is dedicated to all the patients I have had over the years who move through their disease from diagnosis, to treatment, to survival and beyond.

Acknowledgments

I would like to acknowledge my husband who always stands by me in every situation and stage of my life without your support and encouragement, I could not have made it this far. I would like to acknowledge my children who always encourage me and challenge me to learn. Lastly, I would like to acknowledge my mentor Dawn, and my Walden first chair Dr Francisca Farrar who shared words of wisdom and encouragement along the journey and also talked me off the ledge a time or two when I was ready to quit.

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Section 1: Nature of the Project

Introduction

Competence in nursing skills and medical knowledge is essential for caring for patients in any area of nursing. In oncology, competence is crucial because there are so many factors that could harm the patient from the disease state to the treatments, side effects, and adverse events caused by the disease, or the treatments themselves. Oncology nursing is a very specialized area with specific disease states, treatments, and treatment-related problems that can affect a patient. Because of the nature of the cancer disease, patients in the oncology areas can also need palliative care, and competent oncology nurses should be able to assess this need. Nursing in oncology is broken into several areas: disease states such as solid or liquid cancer and treatment states such as medical oncology, radiation oncology, and stem cell treatment. In each of these areas, nurses need to be competent in the knowledge and skills needed to assure the best outcomes and safety for the patients in their care.

Competence is defined as “the ability to do something successfully or efficiently” (Oxford Lexico, 2020). “Competence” and “competency” are often used interchangeably, but Beaver et al. (2016) referenced these terms with different definitions recognizing *competence* as the possession of knowledge and skills and *competency* as the ability to use the individual’s knowledge and skills. Graebe (2019) further assessed competency as the ability to use the knowledge and skills learned within the appropriate situation at the appropriate time. Competence and competency are essential parts of nursing as the nurse must assess the patient’s needs and communicate these needs to the medical team.

Nursing is a process. Once the nursing student has graduated and passed the National Council Licensure Examination (NCLEX), the education does not stop at that point. Throughout the years of the nurse's practice, education continues; the education is tested by competencies that are a part of most of the facilities the nurse practices in. Each nurse within the hospital system this project took place must undergo competency training and skills training yearly.

Patients in any area of nursing expect their nurses to be competent in the skills and knowledge needed to care for them when an illness occurs. The American Nurses Association's (ANA) position statement on professional role competence defines competence in nursing and provides a review of ethics for this competence. The ANA (2014) has affirmed that competence in nursing is not only the responsibility of each nurse but also the obligation of the employer to create an environment conducive to competent practice. As there are many areas of illness, there are also many areas of nursing to practice, each with different responsibilities, challenges, and areas of competence. Nurses should be competent in their area of practice to know the disease state and progress, side effects and symptoms of the treatments offered, and any adverse events the patient may experience. Along with these competencies, the nurse must know basic skills of assessment, communication, and education for their patients. Patients will often confide in their nurse when experiencing problems or having concerns related to their disease, treatments, or side effects.

In the specialized area of oncology, competency in the skills and education needed to care for the intense oncology patient at all stages of the disease, from diagnosis

to hospice care, is an important part of ensuring the patient's best possible outcomes. Currently, there is not a specific competence for each area of oncology nursing; the Oncology Nursing Society does offer certification for oncology nurses in several different areas, but radiation oncology is not one of those areas. Being that there is no standardized competency for oncology nursing in the area of radiation oncology, this leaves the competency training of the nurse to the facility in which they practice.

The problem addressed in this project arose when a patient's family placed a complaint about a specific oncology nursing skill that was performed incorrectly. The skill is part of a competency that is required for medical oncology nurses within the medical system. After the complaint was analyzed, it was found that although medical oncology nurses are required to complete an oncology competency with education and skills used in caring for the oncology patient, the nurses in radiation oncology were not required to complete this competency. The radiation oncology nurses would complete a competency each year, but some were taking part in the hospital competencies, and some were completing a set of skills set by the management of the radiation areas in which they practiced who were not nurses; the radiation oncology areas are managed by radiation therapists.

The plan for this project is to apply a practice guideline for the specialized field of radiation oncology nurses within the network of cancer centers to best equip the nurses to care for the specific needs of the radiation oncology patient with a yearly competency. This guideline will have both education in the specified areas of competence as designated by the management of the cancer centers, the radiation oncology management,

and the Oncology Nursing Society practice guidelines for all oncology nurses. A clinical practice guideline uses evidence and knowledge to help the healthcare organization deliver specific care safely to patients. The creation of the clinical practice guideline for the yearly competency of the radiation oncology nurse will assist the nurses in the radiation oncology department to keep their skills and knowledge up to date and offer the best possible care to the radiation oncology patient. This guideline will consist of education in areas of weakness as noted by the management of the cancer centers and radiation oncology management. Chappell et al. (2018) looked at ways to improve the skills and competence of medical professionals, stating that interprofessional education can improve patient outcomes. To improve patient outcomes for radiation oncology patients, a guideline for education and skills competency is needed within this network of cancer centers.

Problem Statement

Oncology emergencies need to be recognized quickly to intervene and stop potentially fatal emergencies for the oncology patient by a competent oncology nurse who is specifically trained to recognize these events. The Oncology Nursing Society (2022) website refers to competency in oncology nursing as the “fundamental knowledge, skills and expertise” needed to be able to care for complex oncology patients. They further add that this competency will continue to add to the knowledge base of a proficient oncology nurse.

In the area of oncology nursing, there are two distinct specialties, each with specific competencies medical oncology and radiation oncology. The medical oncology

nurse needs competencies of the cancer type and medical treatment along with the side effects and adverse events of those treatments. The radiation oncology nurse needs to know not only the types of cancer and cancer treatments in general but also the specifics of radiation therapy and its specific side effects and adverse events. The patient receiving radiation oncology may have very different side effects and adverse events than the patient who is only receiving medical treatments.

Radiation pneumonitis is a specific side effect or adverse event caused by the radiation treatment itself. Radiation pneumonitis can be experienced by a patient who is receiving radiation therapy to the chest for lung cancer or breast cancer or who has had radiation therapy in these areas in the past. The cells in the lung areas are injured from the radiation which can cause a build-up of fluid that can cause pulmonary fibrosis or chronic inflammation in the lungs (Brant & McManamen, 2003). Radiation pneumonitis is just one of the many side effects or adverse events that can be caused by radiation therapy. The radiation oncology nurse must be competent in the areas of radiation therapy to be able to identify problems the patient may be experiencing with the treatment.

The impetus for this project was an issue that was brought to the attention of leadership. A radiation oncology nurse had accessed a central line in a way that was not according to policy, which was witnessed by another medical professional who then reported the issue to management. An investigation of this issue brought attention to the fact that the radiation oncology nurses within the medical system did not have a standardized competency. The medical oncology nurses within the medical system have a yearly competency for either the hospital oncology nurse or the outpatient oncology

nurse. It was found that there was no specific guideline or policy for the radiation oncology nurse. The problem question addressed within this project was “Will a specific competency for the radiation oncology nurse allow the radiation oncology nurse to remain competent in the care of the radiation oncology patient?”

Purpose Statement

The purpose of this project was to use an evidence-based clinical guideline for radiation oncology nurses’ yearly competency with both education and skills to best care for the radiation oncology patient and their specific needs. I developed the clinical guideline using evidence-based research that is specific to the radiation oncology patient. The clinical guideline was used as a competency that was included in the education on the assessment of the radiation oncology patient including medication reconciliation, hypersensitivity, central line, and intravenous access and maintenance, triage of the radiation oncology patient, communication with the patient and medical team including situation, background, assessment, and recommendation (SBAR) communication and patient education

Part of the goal of this project was to develop an evidence-based clinical guideline education tool to be used for the competency of the radiation oncology nurse. Using this clinical guideline educational tool and skills competency aims to enhance the knowledge and skills of the radiation oncology nurse to better care for the radiation oncology patient. The stakeholders are radiation oncology nurses and nurse managers. Radiation oncology executive management agreed with and supported the project. The use of this clinical

guideline will assist radiation oncology nurses in competently caring for the specific needs of these patients.

Nature of the Doctoral Project

The nature of this project was to develop a staff education program using an evidence-based clinical practice guideline to serve as a yearly competency that allows radiation oncology nurses to remain competent in the care of radiation oncology patients. The sources of evidence for the clinical practice guideline were obtained from evidence-based information in the areas of the specific assessment of the radiation oncology patient, hypersensitivity reactions, intravenous catheters, central line care and maintenance, communication, and patient education. Research into each of these specific areas was identified by using searches in PubMed, CINAHL, and the Oncology Nursing Society. The key stakeholders for the doctoral project are nurses, the clinical management of the radiation oncology department, and the management team of the network cancer centers. The clinical practice guideline for the competency of the radiation oncology nurse helps to standardize the yearly competency of radiation oncology nurses within the network of cancer centers and helps to ensure that all radiation oncology nurses are competent in the areas that affect radiation oncology patients and lead these patients to the best possible outcomes.

Significance

Radiation treatments can have specific side effects and cause adverse events for the patient receiving them such as radiation pneumonitis caused by damage to the lung esophageal ulcers, fistulas caused by radiation treatments to lungs, head and neck

cancers, and bladder problems such as radiation cystitis that can be seen when radiation treatments are focused in the pelvic areas. Radiation oncology nurses need to have proper assessment techniques to be able to assess the problems the patient is having and be able to communicate efficiently with the radiation team of a radiation therapist, medical dosimetrist, and radiation physician to ensure the safety and best outcomes for the patient. To communicate with the team, the radiation oncology nurse must also identify the needs and issues the patient is having and teach the patient when to call the nurse to report any side effects and adverse events. The staff education about a clinical practice guideline competency was designed to better equip the radiation oncology nurse to assess the needs of the radiation oncology patient, perform medication reconciliation, communicate the needs of the radiation patient to the radiation team, and teach the radiation patient the information needed to report any adverse symptoms they may be having.

Summary

This project was designed to address a practice gap and the need for education on a competency specific to the radiation oncology nurse. The project idea was brought to the attention of the education department and to me as a potential DNP project to create a staff education designed for a yearly competency development for the radiation oncology nurse within these cancer centers. Several areas of competency were deemed as important areas to focus on the competency guideline. These areas included assessment, medication reconciliation, review of intravenous lines, hypersensitivity, communication with the patient and team, and patient education using the teach-back model.

Section 2: Background and Context

Introduction

For an oncology nurse in medical oncology or radiation oncology, knowledge and competency are key to providing the best patient outcomes. A yearly competency is a great way not only to provide adequate information needed on new treatments, treatment side effects, and adverse events, but also to help the oncology nurse within these areas to keep skills needed up to date and refresh on any skills they may not have used in a while. In a large outpatient cancer center in western Pennsylvania, a problem was reported when a family member of an oncology patient familiar with best practices in accessing a central line noted the procedure was not performed correctly according to the system's policies. A gap analysis was completed and revealed that although a competency was completed each year with a consistent update and skills verification in the area of medical oncology, there was not a consistent competency and skills verification for the radiation oncology nurse. It was found that some of the cancer centers' radiation oncology nurses would complete a hospital competency, whereas others would complete a competency for other areas, not oncology specialized. To allow for best practices for the oncology patients treated within the outpatient network, a management decision was made to address the issue of a competency specialized for the radiation oncology nurse.

Relevance to Nursing Practice

A nurse competent in the area of practice can give the best quality of care to the patient population. Graebe (2019) explained competency as defined by the ANA, and the American Nurses Credentialing Center (ANCC) as having the knowledge and skills to be

competent in the area of practice looking at two specific programs: the National Continuing Professional Development (NCPD) and Competency-Based Education Network (CBEN). In each of these areas, NCPD and CBEN have different ways to reach competency both looking at outcomes of the practiced competency. One suggestion is to look at the outcome if unfavorable and decide how to make the outcome favorable and educate. The relevance to nursing practice is the more competent a nurse is in the area of practice the better they will be able to help the patient to have the best outcomes.

Local Background and Context

The local background is a large community network of cancer centers with both medical and radiation outpatient centers across western Pennsylvania, southern Ohio, Western Maryland, and southwest New York. These network cancer centers vary in size as per the populations they serve, from larger city cancer centers to more rural cancer centers. The goal of this proposed competency guideline is to have a consistent competency for all the radiation oncology cancer centers to be used yearly. Each radiation oncology nurse is to be signed off as competent in the areas deemed most needed for the radiation oncology patient as decided by the radiation oncology management team.

Mission Statement, Nursing Values, and Strategic Vision

The DNP project was aligned with the organization's mission statement and strategic vision to provide excellent care in prevention and treatment based in evidence, science, and clinical scholarship to partner with community to train the teams of those caring for the cancer patient. The vision of this project was to assure competency of care

in the area of radiation oncology and keep with the standards of competency set in line with the project site's policies and guidelines.

Role of the DNP Student

My role as the DNP student was to assess the radiation oncology nurse in their environment and bring back to the management team areas of practice that are important for the radiation oncology nurse to be competent. Once the assessed areas of competence were approved by the management team, I created an education module for the competency with a pre- and posttest to assess the learning. The education module follows the policies of the network cancer centers and the latest research for best practices within each area. The education competency module was then tested in two of the area cancer centers with 13 nurses who were given access to the model for evaluation and review. I evaluated the results of both the pre- and posttest, along with the nurses' evaluation of the module, and presented the results to the management team of the cancer centers. The plan will be to roll out the competency across the organization's radiation oncology sites and then out to the radiation oncology centers in the regional area, in a manner to be decided by the radiation oncology management team following project completion. I plan to present to the radiation oncology management team the findings from the evaluation of the competency module to provide a foundation for the plan of rollout to the radiation oncology units within the system.

Role of the Project Team

The project team consisted of the management team of the radiation oncology area, which consisted of a nursing liaison, the radiation oncology quality department, the

radiation oncology education department, and me, the DNP student. The role of the project team was to oversee the guideline creation by evaluating the competency learning module, assisting in creating a physical competency skill list, and rolling out the education materials using the completed guidelines once approved by the radiation oncology department nurses.

Summary

The goals of this DNP project was to create an education based on a guideline for the radiation oncology department of a large network of cancer centers with medical and radiation oncology offices. This education on this specific guideline was designed to address the yearly competency needed for radiation oncology nurses to be able to care for radiation oncology patients and allow for these patients to have the best possible treatment outcomes.

Section 3: Collection and Analysis of Evidence

Introduction

When planning the design of an educational program around a new clinical guideline for a large network of medical centers, evidence to support practice in outpatient radiation oncology centers was explored in a number of areas of practice. Research for evidence to develop this competency-based education project for the radiation oncology nurse, was based on researching both the competencies for the nurse in general as well as for the nurse in this specialty area. I searched for more specific evidence based on each area that was to be addressed within the competency education tool. The areas covered in the radiation oncology competency education tool were assessment of the radiation oncology patient with focus in height and weight, which has been an issue within the cancer centers, and medication reconciliation, another important skill. Evidence was also sought on hypersensitivity, access, and maintenance of the central line and peripheral IV catheter; communication with the care team using the SBAR tool; and patient education using the teach-back method.

Practice-Focused Question

The practice-focused question for this project was, can education designed to promote a radiation oncology nurse's use of a competency guideline in practice improve knowledge among radiation oncology nurses based on a pre- and posttest?

Sources of Evidence

The first source of evidence was from the extant literature using the databases, CINAHL, and ProQuest to explore several areas. The first search was on competencies

among general nursing practice, then moved to the specialty areas for any literature on competencies in specialized areas. Once the search for competency was completed, the search was conducted in each of the competency areas that was designated by the radiation oncology management. These areas included assessment skills, specific to the area of radiation oncology, the potential side effects and adverse events the radiation oncology patient may experience, and skills to recognize these signs and symptoms. Evidence on medication reconciliation was researched in respect to the assessment process. Another very important part of practice explored was the oncology treatment plan on access, and maintenance of central venous catheters and intravenous catheters; communication such as triage and between team members using the SBAR method; and patient education using the teach-back method.

Evidence Generated for the Doctoral Project

Participants

Participants for this doctoral project were from the management team of the radiation oncology department. This team involved the radiation oncology management team, the quality control team from the radiation oncology department, the cancer center management team, and the education team for the cancer centers. The resolution team that handles patient issues was identified as the expert panel, which was five control team managers and three nurses who approve the clinical guides from the radiation oncology department. The resolution team education department, and the education department for the cancer centers then appointed me, the DNP student, as the creator of the staff education to inform nursing staff about the guideline developed for issue resolution.

The participants of the implemented education were 13 nurses within the radiation oncology department in various cancer centers. As designated by the radiation oncology management team, the radiation oncology nurses included three radiation oncology nurse managers and 10 radiation oncology nurses.

Procedures

After a root analysis was completed, a guideline for the competency of the radiation oncology nurse was proposed along with an educational program the purpose of this project. The competency that formed the basis for this developed staff education project was created after exploration of needs of the radiation oncology nurses and their competency tasks across the organization's radiation oncology departments and radiation oncology offices. The education was developed from the literature and reviewed by the expert panel. The evaluation of the education was based on a pre- and posttest develop to evaluate knowledge gained using the education and an overall education evaluation. The project received Walden University IRB approval prior to its implementation.

Analysis and Synthesis

Evaluations on the clinical guide of education tool were reviewed. Results of the posttest were compared to the result of the pretest and analyzed using descriptive statistics to note any improvement in the areas covered by the education tool.

Summary

The radiation oncology competency guideline is central to the education developed specifically with the radiation oncology patient in mind to promote the skills and education needed by the radiation oncology nurse to address the needs of the patients

and ensure proper treatment. The education tool was created addressing areas of assessment of the radiation oncology patient, including the proper height and weight measurement and medication reconciliation. Oncology patients receive most of their treatments via a venous catheter, so the education covers venous catheters and central line catheter access and maintenance. The oncology patient can suffer from a hypersensitivity reaction related to the cancer itself or any of the treatments they receive, the education tool covered hypersensitivity reaction by educating the nurse on how this happens and how to address the reaction. Triage, communication, and education are also very important to the cancer patient to be able to have the best outcomes for their treatments and is covered in the education tool. The skills portion of the competency guideline will have the radiation oncology nurse reviewing and participating in a skills check list that is used in all of the cancer centers to make the competency guideline consistent with the network policy for the medical oncology nurse. Once the education tool was created with the above subjects it was tested with 13 nurses in the radiation oncology department with pre and posttest showing an increase in the level of the nurse's knowledge. Evaluations for the education tool were positive for all of nurses.

Section 4: Findings and Recommendations

Introduction

This project identified the gap in competency for the radiation oncology nurse. Each year at the large network of cancer centers, all of the medical oncology nurses complete the same competency with education and skills specific to the medical oncology nurse while the radiation oncology nurse completes a competency from a hospital or area that does not cover the specific needs of the radiation oncology patient. Competency in nursing is essential for caring for the oncology patient receiving treatment with either medication or radiation. In oncology patient care, competency is very important because of the side effects and adverse events that can be experienced by the patient receiving these treatments.

Oncology is a very specialized area with specific disease states, treatments, and treatment-related problems that can affect a patient; nurses need to be proficient in the care that is given. Because of some of the issues, side effects, or adverse events these patients can present with, the nurse must be competent to notice the issue, communicate with the team, and begin any treatment quickly to avoid adverse effects.

Competency in nursing is a must. The nurse must be competent in their knowledge and skills to be able to care for the patients within their care. Oncology is one of many specialty areas in nursing. Oncology nurses will not only come into contact with patients with heart disease, diabetes, and other illnesses but also come into contact with side effects and adverse events from cancer treatment. The oncology nurse within a medical and radiation oncology area will see many of the same side effects and adverse

events, but they will also see many specific side effects and adverse events specific to either the medical or radiation treatment. To be able to care for these patients with their very specific needs, the nurse must be competent in their skills and knowledge of cancer and the treatments. Even though the medical and radiation oncology nurse will see the same patients, the patients may have different needs depending on the treatment they receive. The nurse must know how to help with the needs of these patients. A specific competency for the radiation oncology nurse, much like the competency the network cancer centers have for the medical oncology nurse, will help the radiation oncology nurse to be confident in their competency.

The effectiveness of a staff education program designed around promoting competence in practice among radiation oncology nurses was evaluated in this project. This education was designed to be scheduled during yearly competency education to allow the network of radiation oncology sites to have all nurses follow the same competency or a specific set of skills and education to care for the radiation oncology patient to promote positive patient outcomes and improve patients' quality of life.

Findings and Implications

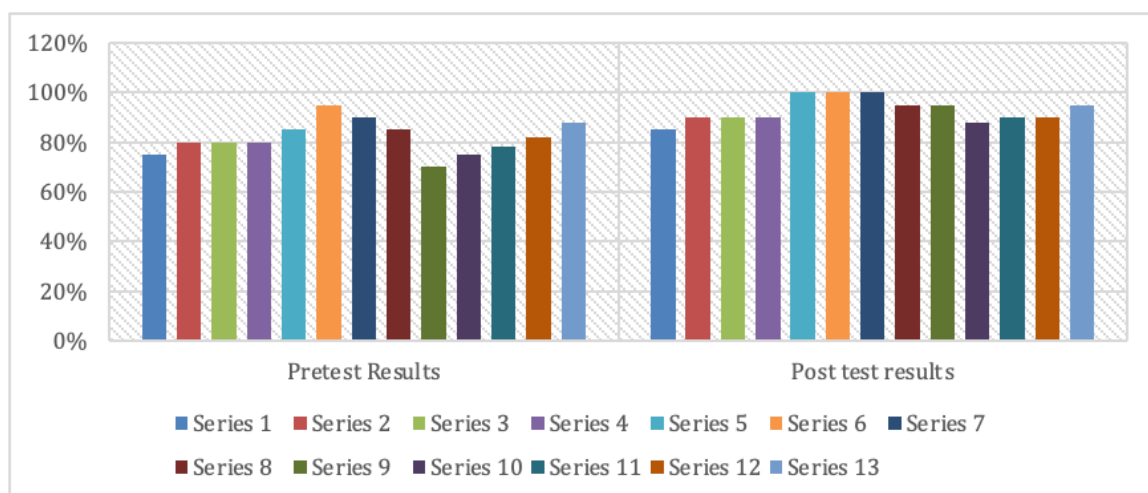
The education about a competency guideline plan was evaluated for the nurses of one radiation oncology department before and after the completion of the education module including the pre and posttest. I used descriptive statistics to analyze results.

The analysis of data from the 13 radiation oncology nurses who participated in the testing of the education. The findings supported the knowledge gained using the education module as noted in the increase in the mean post test scores education score

(see Figure 1). The mean of pretest scores was 80% and mean of the posttest scores was 100%. There was an increase in 20% overall. There was an increase in education, which could lead to a positive social change with increased quality of life for cancer patients.

Figure 1

Pretest and Posttest Scores



Each nurse was also sent an evaluation that asked their opinion on the effectiveness of the learning tool and the usefulness. The evaluations were all favorable. The information on these findings was sent to the radiation oncology management team and the education was approved as a part of the guideline.

Strengths and Limitations of the Project

This project has strengths. The first is that this education was developed based on an evidence-based competency that aims to promote consistency in practice among the radiation oncology nurses. Secondly, using competencies allows the radiation oncology nurse to review up-to-date education and ensure they are performing their skills as per policy protocols. The findings in this project support that this training was effective in

improving knowledge and could be implemented annually in yearly training allowing for the best possible outcomes for the oncology patients. Updating the competency and creating a guideline for the radiation nurse competency at the cancer centers will ensure the nurses' competency to care for this special population of patients. All nurses within the network are required to take part in competencies; several specialty areas have competencies for their areas, including medical oncology. This competency will keep the radiation oncology nurse up to date in their specialized area.

A limitation to the education on this competency guideline lies in that further testing is needed to support the results of the project across radiation oncology departments. The education was provided to nurses in this project. The radiation oncology department management is made up of mostly radiation therapists as well as nurses. Further testing among the therapists will provide more support for its use across the network with all providers. One of the team will need to be designated to sign off on skills.

Section 5: Dissemination Plan

Introduction

The project will be presented to the whole radiation oncology department along with the members and management team of all the cancer centers within the network cancer center. Once presented, the project will be turned over to the radiation oncology management team to disseminate throughout the cancer centers' radiation oncology departments. The education with competency guideline will be disseminated through the cancer center and radiation oncology management teams. The recommended plan is to designate a nursing team to help with the dissemination. The radiation oncology management team already have designated nurses to help with dissemination as they were a part of the test group for the education tool. The competency guideline education for the radiation oncology nurses will be disseminated through the management team and designated nurses.

Analysis of Self

The DNP is a clinical doctorate that prepares its graduates for advanced nursing roles in clinical practice and leadership. Completing this project was rewarding and challenging. My path through this project has helped me to realize the potential I have as a doctorate-prepared leader to influence and improve the state of healthcare by leading and educating nurses in the use of evidence-based practice. I have met some remarkable people on my journey. The experience I had with my preceptor was remarkable. She is and was to me a wonderful for me; she actually talked me off a ledge when I wanted to quit a time or two. She is a leader in our network medical center over a couple of the

community hospital education departments. She involved me in many leadership opportunities and guided me through the process of gathering information for this project. I am extremely excited that I will be graduating with the degree of DNP, which has been a dream and a goal of mine.

This project has helped me to recognize a problem and work with research and evidence-based practices to resolve the problem. This radiation oncology competency guideline will ensure the best possible outcomes for our patients by not only ensuring to update their education but also to work within the hospital system to validate their skills. This project has helped me to gain confidence in myself as a leader and educator. With the confidence and knowledge, I obtained, I will be able to help advance healthcare by educating and leading new nurses to evidence-based practice skills, research, education, and advocacy. Throughout my journey to this DNP, I have become more aware of healthcare policy in my local network hospitals and clinics and nationally. It is my goal now to use the skills I have gained with this DNP to make a difference in healthcare.

Summary

Competency is essential in nursing. A yearly competency is part of the yearly routine for a nurse in any area. Many specialty areas have competencies that are tailored to their area of nursing allowing the specialty nurse to receive education and be signed off on the skill set most used in those areas. The ANA website (2014) addresses competency and agrees competency is important. The ANA states that a nurse should be competent to practice within their areas. The ANA states that the area or healthcare system in which the nurse works should have a way to keep the nurses competent. Skills

and education learned are essential to retain throughout their career to better care for their patients. Competency policies and guidelines help with the scheduling and routines.

Graebe (2019) agreed that competency helps the nurse to use the retained education and skills needed. All specialty areas of nursing have a specific skill set they need to use to give the best care to their patients. Oncology is a very specialized area which can cause a number of issues for patients. Competency in this area of nursing is essential for patients to receive the best outcomes.

A plan was created for a project to make a guideline for the competency of the network's radiation oncology nurses. The plan began with a review of the policy and procedures for the cancer centers, and a meeting with the radiation oncology management team. The radiation oncology management agreed to the creation of a competency for all radiation oncology nurses. A survey of all the skills used by the oncology nurses was conducted after a visit to several of the cancer centers in different areas. Once the survey was completed, the results were sent to the radiation oncology management team. The areas of assessment, hypersensitivity, venous line access and maintenance, communication and education were decided to be included within the competency in an education tool along with a pretest and posttest to evaluate the education. An education module was created on this guideline with a skills competency checklist. The guideline requirement is for an annual competency evaluation using this newly developed education.

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