



LEAD PAPER

Evidence in action: fostering growth of research-based practice in children's cancer nursing

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KEYWORDS

Children's cancer nursing;
Speciality milestones;
Using and developing evidence for practice

Summary It is an honour to be the first children's nurse to be asked to deliver the Robert Tiffany Lecture. However, the invite also provoked some anxiety: the responsibility weighs heavy. An opportunity to both celebrate the success of the speciality and explore the challenges that still face children's cancer nurses could not be missed. Two themes provide the focus for this paper, that of growth and evidence in action. Firstly, I will spend some time reflecting on how far we have come, describing stages of growth, development, maturation and differentiation in children's cancer nursing that defines nurses, and the speciality, as both similar and different to other nurses and other specialities. Secondly, I want to explore the notion of evidence and action and share some of the challenges we face in developing research for practice. The challenges themselves are of interest to all cancer nurses, as the solutions described have the potential for translation to other areas within cancer care. Children's cancer nursing is a relatively new speciality, and in terms of research in nursing this has only become integrated into our work in more recent years. Like many areas in nursing we continue to evolve, by anticipating and responding to changes in cancer treatments and thus influence healthcare delivery. This paper represents a point in time in the United Kingdom. Children's cancer nursing has unique qualities that attract nurses to work in the speciality, the essence of which is knowing about children and young people.

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Zusammenfassung Es ist für mich eine Ehre, als erste Kinderkrankenschwester den Robert Tiffany Vortrag halten zu dürfen. Die Einladung ist jedoch mit einer gewissen Besorgnis verbunden: Sie stellt eine große Verantwortung dar. Die Gelegenheit durfte nicht versäumt werden, einerseits den Erfolg des Spezialgebietes zu feiern, andererseits die Herausforderungen zu zeigen, die sich dem onkologischen Kinderpflegepersonal noch immer stellen. Zwei Themen bilden den Schwerpunkt

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dieser Arbeit: Wachstum und Evidenz (Belegbarkeit) im Handeln. Zunächst möchte ich unseren bisherigen Weg darstellen und die Stadien des Wachstums, der Entwicklung, der Reife und der Differenzierung innerhalb der onkologischen Kinderkrebspflege beschreiben; dabei werden Ähnlichkeiten und Unterschiede zwischen unserem Pflegepersonal und Fachgebiet und anderen Pflegern und Spezialgebieten deutlich. Als zweites möchte ich den Begriff der Evidenz und des Handelns untersuchen und einige Herausforderungen beschreiben, die sich uns stellen, wenn wir Wissenschaft für die Praxis betreiben. Die Herausforderungen selbst sind für das gesamte onkologische Pflegepersonal von Bedeutung, da die beschriebenen Lösungen auf andere Gebiete innerhalb der Krebspflege übertragen werden könnten. Die onkologische Kinderkrankenpflege ist ein relativ neues Spezialgebiet, und die Wissenschaft der Pflege wurde erst in den letzten Jahren in unsere Arbeit integriert. Wie auch viele andere Bereiche der Pflege entwickeln wir uns ständig weiter, indem wir Veränderungen bei der Krebsbehandlung voraussehen und auf sie reagieren, und so die Durchführung der Gesundheitsfürsorge beeinflussen. Diese Arbeit repräsentiert einen bestimmten Zeitpunkt im Vereinigten Königreich. Die einmaligen Qualitäten der onkologischen Kinderkrankenpflege stellen einen Anreiz für das Pflegepersonal dar, in diesem Fachgebiet zu arbeiten; von wesentlicher Bedeutung sind dabei Kenntnisse über Kinder und junge Menschen. © 2005 Published by Elsevier Ltd.

Introduction

"It may be questioned, is there such a difference between the adult and the child, as to require special study on the part of the doctor, and special training on the part of the nurse? Undoubtedly there is" (Wood, 1888, p. 268). As far back as 1888 Catherine Wood was in no doubt that there was a difference between caring for adults and caring for children in hospital. The extent of her conviction stretched to advocating that such differences must be supported with separate training pathways. Such passion established the now widely held view amongst health professionals that children are not small adults. Their physiology and metabolism are significantly different and this difference varies through childhood from the neonate to the adolescent. In addition children's emotional, intellectual and social needs are fundamentally different from those of adults, a difference that varies as the child grows and develops (Berzonsky, 2000; Thomas, 1995). These two core principles alone dictate the need for different educational preparation for nurses who are responsible for caring for children (The Nursing Times, 1921) they underpin early policies regarding place of care (The Ministry of Health [Platt], 1959) and development of nursing specialties (Abel-Smith, 1960).

Cancer nursing is a unique speciality within the profession of nursing, with education programmes available to enhance clinical knowledge with theoretical knowledge since 1952 in the United States of America (USA) (Krcmar, 2000). Children's cancer nursing has a much shorter history with education programmes available in the USA from

1976 (Foley and Fergusson, 2002) and from 1985 in the UK (Gibson and Langton, 1998). Irrespective of this educational milestone, the emergence of paediatric oncology as a distinct sub-speciality occurred in the late 1940s (Malpas, 1996). The current picture is that we see 1200 new cases of cancer in children under the age of 15 years each year (Stiller, 1994). This compares to about 1500–2000 young people between the ages of 15–25 years (Stiller, 2002). Since the early years the speciality has travelled a long and bumpy road that has taken us from a time when the diagnosis of cancer was a metaphor for death (Thompson, 2004), with fewer than 3 in 10 children being cured of cancer in 1962–1966, to the current day, where 7 in 10 children are now cured of cancer (www.ukccsg.org.uk). The aim of this presentation is twofold:

- To briefly chart the development of children's cancer nursing in the UK.
- To describe and examine one approach to develop research based practice as evidence of continuing growth and development within the speciality.

An evolving speciality: children's cancer nursing

In children's nursing an understanding of the dynamic process of growth and development, with its accepted milestones, is fundamental to appreciating the special needs generated by changes

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