

Achieving Sustainable Practice Changes: Evaluation of a Pediatric Oncology Nursing Certificate Program in Tanzania



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Background

Specialized pediatric oncology nursing education is often lacking in resource-limited settings. The education the nurses receive is not adequate to care for this complex group of patients. To address this need, a 10-week clinical nursing course was implemented at Muhimbili National Hospital in Dar es Salaam, Tanzania. Seven nurses participated in the first course.

Unique Features of the Course

- Curriculum developed based on national and international standards of care of the pediatric oncology patient
- Coordinated by experienced pediatric oncology nurse and taught by expert international faculty
- Designed to accommodate the nurses' work schedule
- Lectures limited to one hour in the AM and PM
- Majority of teaching done at the bedside

Changes Implemented During Course

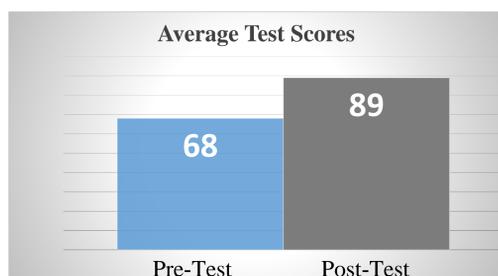
- Adopting Patient-Centered Care (PCC)
- Improving existing Pediatric Early Warning Signs (PEWS) System
- Implementing a 2-person approach to chemotherapy administration



Initial Course Evaluation

Goal: Assess initial impact of the course

- Pre and Post-Test
- Participant and Faculty Feedback



Participant Feedback

In what ways has or will your nursing care or practices change?

- "Offer adequate patient-centred care, early management of fever, and be a leader on the topics covered"
- "Patient-centred care, PEWS for the patients on Upendo ward, assessment, communication and teamwork."

Six-Month Course Evaluation

Goal: Assess the impact & sustainability of the course

- Questionnaire/Survey
- Survey completed by nurses, physicians and patients

- 10 surveys completed
- 82% reported PCC was consistently implemented
- 90% reported PEWS performed daily
- 90% reported regular use of the 2-nurse chemo check system

All physicians and nurses who completed the survey agreed on the following statements:

- I want PCC and PEWS to be a standard on the ward
- I use the PEWS as a way to know my patient's condition
- I think the 2-person chemotherapy verification should be the standard on the ward and is a safer way to administer chemotherapy and I am more confident in the process giving now that it is a 2 person verification

Additional Comments

The care has "improved in terms of making assessments and providing care to the patient's depending on PEWS situation"

"The care has improved as we have increased interpersonal relationships between patient, patient relatives, and other members of staff"

"Hypertensive children previously missed until symptomatic, now are being identified and treated on presentation"

Next Steps

Second course currently being held, Sept.- Nov. 2019
Based on feedback course changes include:

- 8 week course with 2 week break
- Mentor nurses to teach in course

Continue to assess positive impact of the course:

- Monitor antibiotic turn around time
- Audit chemotherapy errors

Similar trainings to be conducted in other TZ hospitals, using the same approach

Acknowledgements



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