# Reflections on Research

### Réflexions sur la recherche Vellenions sur la recherche

This column will highlight education and practice issues for research and research application. Our aim is to increase awareness and comfort with research and to demonstrate that research can be user-friendly.

# Bringing oncology research into the clinical setting: Meeting the standards

by Priscilla M. Koop

With the increasing focus on evidencebased practice, the need for excellent, clinically relevant oncology nursing research is greater than ever. Equally important is the need for that research to be incorporated into clinical practice. According to the Canadian Association of Nurses in Oncology/ l'Association Canadienne des Infirmières en Oncologie (CANO/ACIO) (1995), oncology nurses are responsible for participating in research (Standard IV: 2.7 - 2.9). What exactly do these standards mean and how can we make it possible for oncology nurses in all clinical settings to achieve these standards? Oncology nurses are extremely busy and the prospect of adding time for library work can be daunting. Few staff nurses have completed more than one or two introductory research methods and/or statistics courses, and most may feel unprepared to review the research literature critically. The purposes of this column are to review the three standards which relate to oncology nursing research and to suggest possible strategies for incorporating research into practice.

First, let us look at Standard IV: 2.8 which reads, "(Oncology nurses in any practice setting) demonstrate an attitude of critical reflection and inquiry regarding oncology nursing practice" (CANO/ACIO, 1995, p.22). This standard provides the basis for bringing the research literature into clinical practice. Oncology nurses who are "critically reflective" ask lots of questions - of their colleagues, of the literature, and of themselves. At conferences, they attend as many sessions as possible and ask questions of the speakers. They talk with other nurses about what they have read and heard (and their perspective is not always flattering to the researchers!). They are likely to speak up at shift report or during coffee breaks with "Why?" questions. They try to understand why we follow certain routines and not others. They try to square practice with the stated mission and philosophy of the institution.

How do oncology nurses develop these attitudes within themselves? Ideally, the educators and preceptors encountered in one's nursing education will have fostered an inquiring mindset. Lucky graduates will have taken their research methods and statistics courses from educators who facilitated the development of curiosity and confidence within their students. Another way to develop this mindset in one's self is to spend as much time as possible with peers and mentors who display these attitudes in their professional lives. Finally, we need to simply begin the habit of asking ourselves why we provide and organize our care the way we do. "Is there a better way to do this?" is something we need to ask ourselves on a regular basis.

Standard IV: 2.7 provides some guidance about what to do with the questions which we ask ourselves: "(Oncology nurses in any practice setting) are knowledgeable about oncology nursing research and utilize the findings in practice." The idea of keeping up with the field of oncology nursing research

is quite daunting when one realizes how many journals are devoted to oncology nursing or related areas. Journal clubs are a possible strategy to keep in touch with the oncology nursing literature and can be run in a variety of ways. If the journal club is organized topically, then each member brings one article on a previously agreedupon topic and contributes both clinical insights and the contents of that article to the discussion. Alternatively, articles can be photocopied and distributed prior to the meeting and then all members discuss them from a common base. Photocopies can be made for personal use without violating copyright.

Clinical rounds are another terrific idea for bringing the research literature into clinical practice. On a recent trip to Montreal, I spent time with oncology nurses in several hospitals and saw some innovative ideas for handling clinical rounds. At one of the clinical rounds, three pairs of nurses each presented a patient with complex clinical issues. They provided a history of the patient and family, presented relevant literature to the clinical situation, and then conducted a discussion of the issues that they saw as unresolved. The discussion was thoughtful, insightful, and relevant to the participants as well as the presenters. One of the presenters commented that the discussion had facilitated new ways of thinking about clinical situations.

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If you do not have access to a journal club or clinical rounds, there are other strategies for reading the research literature and thinking about how it might facilitate clinical practice. The Canadian Oncology Nursing **Journal** offers research-based articles and is an excellent place to find answers to clinical questions. Many oncology nurses subscribe to other journals as well. The internet is another source of research literature. Most databases (e.g. CINAHL, CancerLit) offer abstracts or full texts of published articles. If you have a computer and access to the internet, you can do the literature searching and reading from the comfort of your home. Libraries, whether based in a clinical or educational setting, typically have computers with access to the internet. If you weary of the hustle and busyness of your working environment, the hospital library also offers the wonderful side attraction of being a peaceful place for a break.

The second part of this standard focuses on utilizing research findings in clinical practice. The literature on using research in practice tends to advise syntheses and thorough critiques of a whole body of literature before changing practice (e.g. Titler, 1998). This advice is sound and is meant to avoid the premature adoption of tentative findings into practice. Carried to a logical extreme, however, this advice might suggest that nurses not bother to read any research literature other than a systematic literature review. I think that would be a mistake. Small descriptive studies and qualitative research, although they may not meet inclusion criteria for large systematic literature reviews, may nonetheless offer new insights into practice and are, therefore, of potential value to the oncology nurse. I encourage oncology nurses to read the oncology nursing literature with an inquiring mind and to weigh current practices with the ideas evident in the literature. I would also encourage oncology nurses to allow the ideas to affect the way they think about their practice - to explore (within the limits of established policies and the principle of safe practice, of course) the various ways of offering excellent and thoughtful care to their patients.

Standard IV: 2.9: "(Oncology nurses in any practice setting) participate in research activities to expand the body of knowledge in oncology nursing." Oncology nurses can participate in research in a variety of ways and can play a range of roles on the research team. Staff nurses may participate in research by providing information sheets to patients or family members as a way of inviting them to participate in ongoing oncology nursing research. Nurses may help more directly with respondent accrual by verbally inviting patients and family members to participate as respondents. This assistance can be of tremendous value, as nurses in clinical practice are familiar with their patients and can time the invitation to give patients and family members an opportunity to think about whether or not they wish to participate in any particular research project. Staff nurses may also collect data as research assistants or they may be involved as coinvestigators on research projects. Whatever the research activity and the researcher role, staff nurses in oncology have tremendous assets for the conduct of oncology nursing research.

I recommend that oncology nurses find out about ongoing nursing research in their clinical settings and explore ways to get involved. Participating is a good way to learn more about the process of research. As you get involved and learn the process, you may become more active in the research process by posing questions that need to be researched.

In this column, I have reviewed the three CANO/ACIO standards that relate to involvement in research by nurses in any clinical setting. I have recommended strategies for meeting these standards. There are many additional strategies that are currently being used to bring oncology nursing practice into the clinical setting. I would be pleased to hear about the strategies which you currently use. I would be pleased to share these strategies with your colleagues across Canada. Please write to me and let me know what works for you.

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#### References

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Titler, M.G. (1998). Use of research in practice. In G. LoBiondo-Wood & J. Haber (Eds.), Nursing research: Methods, critical appraisal, and utilization (4th ed., pp. 467-498). St. Louis: Mosby.

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- go to the Canadian Oncology Society's (COS) web site, found at www.cos.ca
- when the COS home page appears, click on the number 5 in lower portion of left-hand side of screen; this will take you to the next screen
- on the left-hand side of the new screen, click on "Affiliated Societies"
- members of COS will appear. Scroll down until you find CANO
- click on CANO's name
- you will arrive at CANO's home page where the philosophy, mission, and goals and objectives are easily viewed
- CANO's home page also allows you to obtain a membership form and/or obtain access to CANO's secure web pages
- if you want to obtain a membership form or learn more about membership benefits, click on "Membership Application and Benefits"
- to access CANO's secure web pages, click on "CANO members"
- follow directions to obtain your password
- once you have your password, your journey through CANO's web pages will begin!!

Have fun learning more about CANO! Don't forget - your comments are important to us. Please let us know how we are doing by e-mailing the web pages working group at r3kchapman@health.nb.ca.

