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## An Important Role for Cancer Nurses: Responding to Distress in Cancer Patients

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Individuals diagnosed with cancer experience more than a physical impact. Psychosocial distress commonly emerges as patients cope with many changes. Early identification of distress and the provision of interventions aimed at reducing this burden is stated as a standard of quality cancer care.

The aim of this work was to define the role of cancer nurses in responding to the emotional and symptom distress experienced by cancer patients and document the best practices for implementing a program of screening for distress in ambulatory settings.

A programmatic approach to screening for distress (6<sup>th</sup> vital sign) has been implemented in several cancer facilities across Canada. The program includes protocols for screening, algorithms for assessment, and guidelines for evidence-based interventions. Introduction of the programs has included relevant education of cancer nurses and close attention to the uptake and utilization of practice guidelines.

Evaluation of successful program implementation has shown increased patient satisfaction with care following the program implementation. Patient concerns are the focus for opening conversations with individuals and the basis for planning person-centered approaches to care. Patient concerns beyond those related to the tumor and side effects are identified through the screening for distress strategy. Nurses are in an excellent position to respond to the patient generated scores on the standardized distress screening tool as part of their patient assessments and care. The response to the screening scores has a direct impact on patient satisfaction and outcomes of care.

Using a concrete programmatic approach, including screening, focused evidence-based assessment and intervention is beneficial in achieving person-center care for cancer patients. However, in busy clinical settings, an intentional effort is needed to implement the necessary components of the programmatic approach (i.e., screening, assessment, intervention). Leadership and clear role definition are critical to the success of the program implementation.

### Biography:

Dr. Fitch RN PhD is Professor (Adjunct) in the Bloomberg Faculty of Nursing and Professor in the School of Graduate Studies at the University of Toronto. Dr. Fitch is also the Editor-in-Chief for the Canadian Oncology Nursing Journal and served as Advisor on Cancer Survivorship to the Person-Centered Portfolio of the Canadian Partnership against Cancer. She provided leadership across Canada in implementing a person-centered approach for cancer patients. Dr. Fitch was the Founding President of the Canadian Association of Nurses in Oncology and served as a Board member and the President of the International Society of Nurses in Cancer Care.