



EdCaN

National Education Framework Cancer Nursing

A National Professional
Development Framework
for Cancer Nursing

June 2008

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Preamble

We would like to thank everyone who, individually or as a representative of their organisation, contributed to this Framework by providing feedback and suggestions for its direction and content. People affected by cancer, individual nurses including cancer nurses as well as organisations including Cancer Australia, Cancer Nurses Society of Australia, the Australian Nursing and Midwifery Council, the Council of Deans of Nursing and Midwifery, the Royal College of Nursing Australia, the National Breast and Ovarian Cancer Centre, the Breast Cancer Network Australia, the various state Cancer Councils of Australia, the Cancer Institute New South Wales, the Australian Rural Nurses and Midwives, and the Leukaemia Foundation all provided valuable feedback on this Framework.

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If you have any queries or comments regarding this document, please contact EdCaN via the website – www.edcan.org

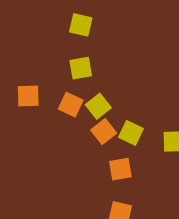


Professor Sanchia Aranda
Project Lead
Director of Cancer Nursing Research
Peter MacCallum Cancer Centre



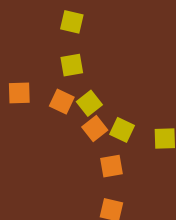
Professor Patsy Yates
Project Lead
School of Nursing
Queensland University of Technology

June 2008



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Introduction

Under the Australian Government's Strengthening Cancer Care initiative, funding was provided for the development of education programs for nurses. The resulting program, the National Cancer Nursing Education Project (EdCaN) provides a way forward for the development of the cancer nursing workforce in Australia through a framework and a set of capabilities outlining the role expectations of nurses working in cancer control. It also provides resource materials to help nurses acquire these capabilities. The development of this framework for cancer nursing and the accompanying education resources are part of the broader cancer control efforts needed to reduce the burden of cancer in Australia.

A National Professional Development Framework for Cancer Nursing consists of two parts.

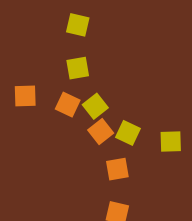
Part 1 includes:

- The purpose, aims and objectives of the Framework;
- An overview of the context of nursing in cancer control;
- A model for professional development for nurses in cancer control;
- Pathways for the development of nursing competency in cancer control.

Part 2 consists of:

- Core Capabilities for Registered Nurses in Cancer Control;
- Competency Standards for Specialist Cancer Nurses.

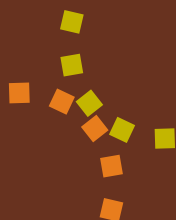
In recognition of the contribution of all nurses to cancer control efforts, it is expected that competency standards for nurses working in other roles, including Enrolled Nurses and Nurse Practitioners, will be developed for inclusion in subsequent editions of this Framework.



Principles underpinning the Framework

This Framework has been developed through a literature review and after extensive consultation with nurses, people affected by cancer and other stakeholders over a period of two years. The following principles underpin the Framework:

1. The priorities, needs and experiences of people affected by cancer should be central to the development of cancer control programs and to the involvement of nurses in such programs.
2. Efforts to reduce the burden of cancer in our community require a population-based approach to health service planning and delivery. The particular geographical, social and cultural needs of people affected by cancer, including the needs of specific population groups such as Indigenous Australians, socioeconomically disadvantaged people, those from non-English speaking backgrounds and people in rural and remote areas must be considered to ensure a responsive and inclusive approach to cancer control.
3. People affected by cancer have many and often complex needs throughout their cancer journey. Interdisciplinary practice is an established standard of care for meeting these needs.
4. Nurses are essential to interdisciplinary cancer control efforts, as nurses make an important contribution to meeting the needs of people affected by cancer at all stages of the cancer journey.
5. Nurses' involvement in cancer control is governed by the values, guidelines and principles set out by regulatory and professional bodies, taking account of current evidence, population health needs and Australian Government priorities in cancer control.
6. Nurses need to be responsive to the needs of people affected by cancer, by incorporating new practice areas and capabilities as they evolve, as well as negotiating the scope of practice with other health professionals involved in cancer control.



Key Definitions

The key concepts used in this Framework are defined below. A glossary is also included at the end of this Framework to provide definitions for a range of other terms used throughout this document.

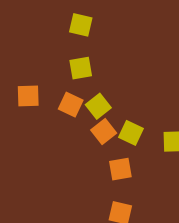
People affected by cancer refers to people affected by all types of cancer, including those at risk of developing cancer, people living with cancer, cancer survivors, carers, family members and significant others.

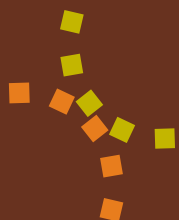
Cancer control refers to all actions that aim to reduce the burden of cancer on individuals and the community, including research, prevention, early detection/screening, treatment, education and support for people with cancer and their families and monitoring cancer outcomes.^{1 p.ix} Cancer control is built on a broad population health model which focuses on the needs of people affected by cancer and the continuum of care. It encompasses the impact of diagnosis, active treatment, follow up, survivorship, supportive and palliative care.

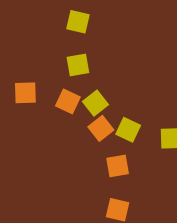
Continuum of care includes the entire trajectory of the experience of people affected by cancer. While this trajectory will vary for each individual, Australia's National Service Improvement Framework for Cancer^{2 p. 7} has identified five main phases that correspond to the critical elements of health services needed by people affected with cancer, to respond to their disease-related and personal experiences. These phases are:

1. Reducing the risk of developing cancer;
2. Finding cancer as early as possible, if early treatment is effective;
3. Having the best treatment and support during active treatment;
4. Having the best treatment and support after and between periods of active treatment;
5. Having the best care at the end of life if the cancer is not cured.

Domains of health include the physical, psychological, emotional, cultural, social, practical, spiritual and informational aspects of a person's health and wellbeing.³







PART 1

A National Professional Development Framework for Cancer Nursing

A National Professional Development Framework for Cancer Nursing

Purpose

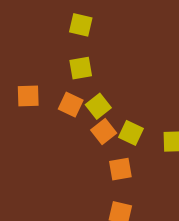
To reduce the burden of cancer in Australia by providing a framework to guide the development of a sustainable nursing workforce capable of providing high quality services that meet the needs of all people affected by cancer.

Aim

To provide a framework to support nurses' professional development in cancer control.

Objectives

1. To define nursing's contribution to cancer control.
2. To highlight the need for all nurses to participate in cancer control, irrespective of where they work.
3. To guide nurses' ongoing professional development in cancer control.
4. To articulate the capabilities expected of nurses working in cancer control.
5. To promote the development of learning resources that support the professional development of nurses working in cancer control.
6. To provide a national standard for professional development programs aimed at strengthening nurses' abilities to care for people affected by cancer.
7. To ensure the professional development of nurses working in cancer control is consistent with nationally agreed standards for the profession of nursing and for cancer control.



Context

With one in three men and one in four women being diagnosed with cancer by age 75 years⁴, the impact of cancer on the community is a major public health issue and is one of the Australian Government's identified health priorities. Australian efforts to reduce the burden of cancer are articulated in the National Chronic Disease Strategy⁵ and the National Service Improvement Framework for Cancer (NSIFC).² The strategies included in these documents emphasise the importance of having a skilled workforce that is capable of meeting the needs of people affected by cancer at all stages of the cancer continuum.

A broad population-based approach underpins the EdCaN Framework, enabling an understanding of nurses' professional development needs in parallel to the needs of communities affected by cancer. This facilitates a pro-active response to emerging or identified trends and issues, such as unmet needs or prevalence as determined by epidemiological studies. In addition, a population-based approach encompasses the whole-of-life span from infancy to old age, the spectrum of care levels from primary to tertiary and the full range of interventions from prevention to maintenance.⁶ The population-based approach also allows a broad perspective on strategies to improve cancer control at individual, family and broader social levels.

A diagnosis of cancer has a profound impact on individuals' and family members' health and wellbeing, including its physical, social, emotional, psychological, informational, spiritual and practical aspects. People affected by cancer will experience varying health and support needs, which are likely to change over time and will require a range of health and support services from community, primary, secondary and tertiary care agencies. Throughout their cancer journey, people's needs for specialist services will also vary.

In addition to their professional participation in the lives of people affected by cancer, nurses also provide services which are integral to reducing the burden of cancer on individuals and communities, through primary and secondary prevention efforts. Therefore, this professional development framework for nurses in cancer control reflects nurses' many roles in responding to the varying health needs of people at different points in the cancer continuum and in a range of health care settings.

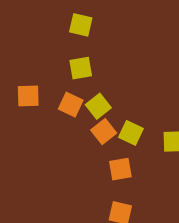
Nursing and Cancer Control

Professional scope of practice refers to "... the full spectrum of roles, functions, responsibilities, activities and decision-making capacity which individuals within the profession are educated, competent and authorised to perform".^{7 p.6} Professional scope of practice is set by legislation and normally articulates expected practice at a beginning level. From this start point, each nurse's scope of practice develops over time and is influenced by factors such as the context of practice and organisational policies, the needs of consumers, and the practitioner's education and experience.

The model presented in Figure 1 describes nurses' varying contributions at all phases of the cancer continuum, outlining the competency standards required of nurses working in different roles, in different settings and at different points along this continuum. According to this model, all nurses, regardless of practice setting are likely to have contact with people affected by cancer and will therefore require some level of capability in cancer control. Some nurses will, however, require specialised and advanced competencies in cancer control, as their practice requires them to respond to the particular health and support needs of people affected by cancer.

While the dynamic and complex nature of contemporary practice environments means it is not possible to provide clear definitions of the scope of nursing practice or discrete levels of practice, four broad groups of nursing services are defined in this Framework. These groups do not constitute a hierarchy of practice, but rather are intended to represent the scope of practice and associated areas of competence required of nurses working in different contexts at different times in the cancer continuum. The Framework also intends to recognise that within each of the four groups, nurses may function at varying levels of competence from beginning through to the advanced levels, characterised by more effective integration of theory, practice and experience along with increasing degrees of autonomy in judgements and intervention.⁸ This Framework thus recognises the need for universal services for all people affected by cancer, many of which may be provided by nurses working in non-specialist practice settings and augmented by the specialised services that people affected by cancer require at particular points of their cancer journey. Specialist cancer services are more likely to be required for people at high risk of experiencing adverse outcomes, whose needs are more complex or cannot safely be met by non-specialist services.

Below is a brief description of the four broad groups of nursing in cancer control defined in Figure 1. The descriptions provide examples of the scope of practice and associated competency standards.



All nurses, regardless of practice setting, are required to work collaboratively with the person affected by cancer to address their health needs. At all stages of life and at several points across the cancer continuum, people affected by cancer will require services from nurses in generalist settings such as general practice, diagnostic services and general medical/surgical services. People affected by cancer may also have co-morbidities and may live with the consequences of cancer beyond an active diagnostic and treatment phase, in survivorship or at end of life. When in contact with people affected by cancer, all nurses need to be capable of applying generic nursing competencies to meet the health needs of these individuals. For example, some of the key cancer care concepts identified as relevant for nurses entering practice include beginning level skills in communication, psychological, social and emotional support and conceptualisation of the meaning of cancer.^{9, 10}

The core capabilities required for all nurses who provide services for people affected by cancer are outlined in Part 2 of this Framework.

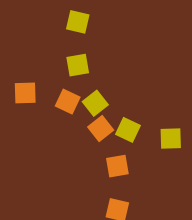
Many nurses will participate more frequently or for short intensive periods in the care of people affected by cancer due to their expertise in addressing specific health needs. Although not in specialist cancer nursing roles, some of these nurses will be specialists in areas such as head and neck surgery, infection control, stomal therapy or palliative care. They may also be in community health or rural and remote settings where they frequently come into contact with people affected by cancer. These 'Many' nurses who provide care for people affected by cancer will demonstrate the application of core capabilities at a more advanced level in the particular cancer control contexts in which they practice. These nurses will require access to further education in areas of specialist cancer control with a direct application to their role.

Some nurses will choose to become specialists in cancer control. Most specialist cancer nurses work in dedicated cancer services and may be primarily responsible for care of people at a specific phase of their journey (e.g. radiotherapy), or across all phases of the cancer journey (e.g. specialist breast nursing¹¹). Others may work in a broader context but provide a specialist resource in cancer control to a range of generalist providers (e.g. a Cancer Nurse Coordinator). This Framework specifies a set of competency standards that reflect the specialised knowledge and skills required to provide safe and competent care to people affected by cancer. These standards have been adapted from the competency standards for Specialist Breast Nurses developed by the National Breast Cancer Centre¹¹, and are consistent with the generic competency standards for advanced nurses established by the Australian Nursing Federation.¹² The Specialist Cancer Nurse competencies are a minimum standard. It is expected that as their practice advances, Specialist Cancer Nurses demonstrate more effective integration of theory, practice and experience along with increasing degrees of autonomy in judgements and interventions for people affected by cancer.⁸ There is currently no accepted national educational standard for Specialist Cancer Nurses, but development of competency standards such as those specified in this Framework would normally require further education in cancer control at



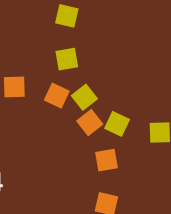
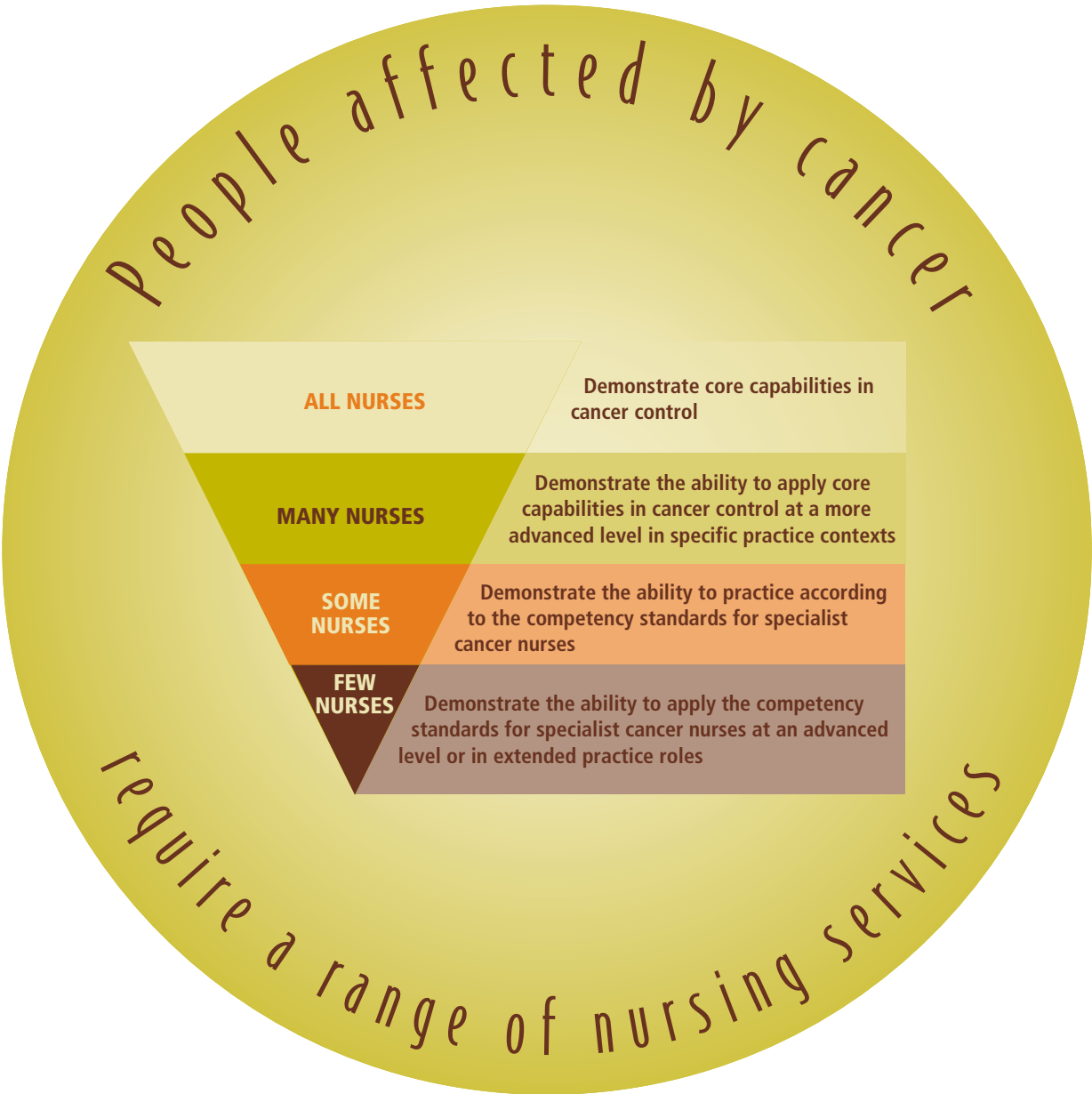
postgraduate level.

Few nurses will become competent and authorised to practice in an advanced and/or extended role in cancer control. These nurses will build on the capabilities of the Specialist Cancer Nurse through additional experience and education at the Masters level or equivalent. The practice of nurses in this group reflects a more advanced application of the competency standards for the specialist nurse. For nurse practitioners in cancer control, competency standards will also be based on the Nurse Practitioner competency standards developed by the Australian Nursing and Midwifery Council.¹³ As advanced and extended practice roles in cancer control expand, it is expected that a set of competency standards for nurse practitioners in cancer control will be included in subsequent editions of this Framework.



Professional Development Model for Nursing in Cancer Control

(Fig 1)



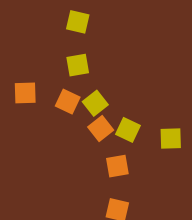
Professional Development of Nurses in Cancer Control

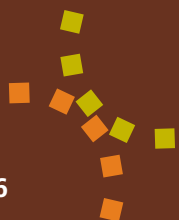
Consistent with the model for cancer nursing outlined in Figure 1, nurses will require access to ongoing professional development opportunities that will enable them to develop the level of competence in cancer control required to meet the changing needs of the populations they serve and the context of their practices. Part 2 of this Framework defines the level of competence required for nurses working at these differing levels of practice.

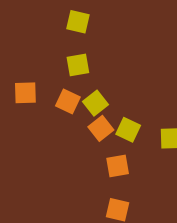
Typical learning experiences that will contribute to the development of the required level of competence in cancer control can include:

- Actual or simulated practice situations involving working with people affected by cancer, where reflection and learning from practice experiences is facilitated;
- Structured learning experiences, including cancer control learning activities in entry to practice programs, continuing professional development programs relevant to cancer control, or postgraduate specialist cancer nursing courses;
- Ongoing learning about current practices and new advances in cancer control through activities such as reviewing research developments, participating in continuous improvement activities, or participating in professional meetings.

The nature and scope of the learning experiences required for each individual nurse will be determined by the level of competence required. Regardless of educational level or practice role, all nurses are bound by the standards of professional practice in nursing and are expected to work with existing decision making frameworks that guide their scope of practice.







PART 2

Competency Standards for Nurses in Cancer Control

Core Capabilities for Registered Nurses in Cancer Control

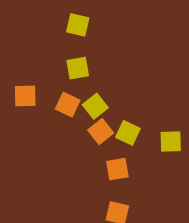
Registered nurses must meet the Australian Nursing and Midwifery Council's (ANMC) entrance to practice national competency standards for registered nurses.¹⁴ These competency standards are developed through education programs which prepare nurses for entry to practice. By applying these competency standards to the care of people affected by cancer the core capabilities required for all nurses have been derived. These capabilities are relevant to nurses who work in non-specialist cancer settings, such as primary care settings, medical/surgical units, or other practice settings where the people receiving services may have a diagnosis or be at risk of cancer.

The 'Many' nurses group in cancer control, because they participate more frequently or for short intensive periods in the care of people affected by cancer (e.g. stomal therapy nurses or nurses in rural or remote settings), will also demonstrate these core capabilities at a more advanced level in the particular cancer control context in which they practice.

Consistent with the ANMC competencies, the capabilities required of nurses working with people affected by cancer are identified within the four core domains of practice of the registered nurse. These four domains provide an organising framework for categorising core capabilities in cancer control required of all nurses, thus enabling the capabilities to be integrated with the existing curriculum frameworks for courses preparing nurses for entry to practice.

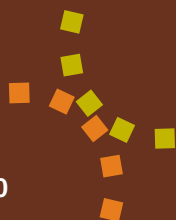
The four domains of nursing practice are:

- **Professional Practice:** The professional, legal and ethical responsibilities which require that nurses demonstrate a satisfactory knowledge base, accountability for practice, ability to operate in accordance with legislation affecting nursing and health care, and the protection of individual and group rights.
- **Critical Thinking and Analysis:** The self-appraisal, professional development, and demonstrated embrace of evidence-based practice. Reflecting on practice, feelings and beliefs and the consequences of these for individuals/groups is an important professional benchmark.
- **Provision and Coordination of Care:** The coordination, organisation and provision of nursing care that includes the assessment of individuals/groups when planning, implementing and evaluating care.
- **Collaborative and Therapeutic Practice:** Establishing, sustaining and concluding professional relationships with individuals/groups. This also contains those competencies that relate to the nurse understanding their contribution to the interdisciplinary health care team.^{14 p.2}



Domain: Professional Practice

Core Capabilities in Cancer Control	Associated ANMC Competency
Applies legal and ethical decision-making principles in planning and delivering care for the person affected by cancer.	Practices in accordance with legislation and common law affecting nursing practice and health care.
Acknowledges the need to ensure people affected by cancer have adequate knowledge of the potential benefits and adverse effects of cancer treatment whilst respecting their beliefs and preferences.	Advocates for individuals/groups and their rights for nursing and health care within organisational and management structures.
Understands the impact the diagnosis of cancer has on all domains of health and wellbeing.	Recognises and responds appropriately to unsafe or unprofessional practice.
Provides culturally-appropriate care that demonstrates respect and understanding for people's beliefs and preferences regarding cancer and its treatment.	Practises in a way that acknowledges the dignity, culture, values, beliefs and rights of individuals/groups.
Recognises the potential hazards associated with the provision of cancer therapies and complies with safety regulations.	Understands and practices within own scope of practice.
When involved with the provision of cancer therapies, practices within scope of practice and seeks assistance if a gap in knowledge or skills exist.	Integrates nursing and health care knowledge, skills and attitudes to provide safe and effective nursing care.

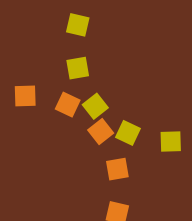


Domain: Critical Thinking and Analysis

Core Capabilities in Cancer Control	Associated ANMC Competency
Plans and delivers evidence-based nursing care in a variety of settings relevant to the person affected by cancer.	Practices within an evidence-based framework.
Understands the principles for assessing and managing the clinical support needs of the person affected by cancer.	Participates in quality improvement activities.
Accesses evidence-based resources and expert advice to support care of the person affected by cancer.	Acts to enhance the professional development of self and others.
Acknowledges personal and team members' needs for professional development and support to meet the needs of the person affected by cancer.	

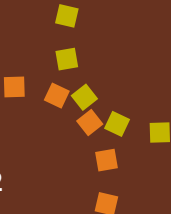
Domain: Provision and Coordination of Care

Core Capabilities in Cancer Control	Associated ANMC Competency
Plans and delivers nursing care that incorporates physical, psychological, social, cultural and spiritual aspects/knowledge pertaining to care of the person affected by cancer.	Conducts a comprehensive and systematic nursing assessment.
Applies evidence-based principles to the assessment and management of common disease and treatment related symptoms experienced by people affected by cancer.	Plans nursing care in consultation with individuals/groups, significant others and the interdisciplinary health care team.
Determines the effectiveness of nursing interventions on clinical outcomes via regular and ongoing assessment of the person affected by cancer.	Provides comprehensive, safe and effective evidence-based nursing care to achieve identified individual/group health outcomes.
Identifies and understands the range of support services available to the person affected by cancer and refers to them.	Evaluates progress towards expected individual/group health outcomes in consultation with individuals/groups, significant others and the interdisciplinary health care team.



Domain: Collaborative and Therapeutic Practice

Core Capabilities in Cancer Control	Associated ANMC Competency
Communicates and networks with interdisciplinary specialist cancer care teams when planning and delivering care for the person affected by cancer.	Establishes, maintains and appropriately concludes therapeutic relationships.
Demonstrates knowledge of how to access and refer to specialist cancer care services as needed.	Collaborates with the interdisciplinary health care team to provide comprehensive nursing care.
Communicates effectively in the context of an individual's social and emotional responses to living with cancer.	



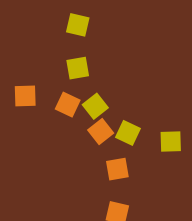
Competency Standards for Specialist Cancer Nurses

The competency standards for the Specialist Cancer Nurse (SCN) are intended for those nurses who choose to become specialists in cancer control. These competency standards are intended for nurses who work in dedicated cancer services and may be primarily responsible for care of people at a specific phase of their journey (e.g. radiotherapy), across all phases of the cancer journey (e.g. specialist breast nursing¹¹), or who may work in a broader context but provide a specialist resource in cancer control to a range of generalist providers (e.g. a Cancer Nurse Coordinator).

The competency standards are intended to represent the minimum standard required for specialist practice in cancer nursing. As their specialist practice advances, cancer nurses will demonstrate more effective integration of theory, practice and experiences along with increasing degrees of autonomy in judgements and interventions for people affected by cancer.¹³

Building on the competencies developed for the Specialist Breast Nurse¹¹ these competencies are able to be applied to all cancer settings. The four domains of practice defined in the ANMC Competency Standards for the Registered Nurse provide an organising framework for categorising the competency standards required of SCNs. These domains of nursing practice as defined in the section “*Core Capabilities for Registered Nurses in Cancer Control*” are:

- *Professional Practice;*
- *Critical Thinking and Analysis;*
- *Provision and Coordination of Care;*
- *Collaborative and Therapeutic Practice.*^{14 p.2}



Domain: Professional Practice

This domain comprises competencies that reflect the SCN's ability to develop professionally, participate effectively in clinical governance and influence cancer control efforts at the systems level.

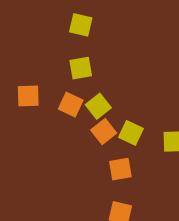
Competency Standard	Performance Criteria
Engages in and contributes to informed critique and exerts influence at the professional and systems level of health and cancer care.	<ul style="list-style-type: none"> • Demonstrates an understanding of national and global trends in cancer control. • Understands the impact of health and organisational policy on the delivery of cancer services. • Contributes to initiatives within the cancer consumer movement, the profession, interdisciplinary team and health care systems aimed at enhancing cancer control efforts. • Participates actively in workplace, professional, consumer and other organisations relevant to cancer nursing and cancer care.¹¹ • Articulates and promotes the contribution of specialist cancer nursing to outcomes for the person affected by cancer in clinical, professional and policy contexts.¹³
Uses appropriate mechanisms for monitoring own performance and competence as an SCN.	<ul style="list-style-type: none"> • Demonstrates awareness of and observes boundaries of practice in accordance with professional and organisational role descriptions, guidelines and standards for specialist cancer nursing and cancer care. • Demonstrates a commitment to maintaining competence through participation in professional development activities relevant to cancer care.¹¹ • Implements processes for obtaining and responding to information from people affected by cancer and other members of the health care team about the effectiveness of SCN clinical practice.¹¹ • Participates in professional clinical supervision and/or other peer-review processes for monitoring the appropriateness of personal and professional responses to individual situations.¹¹ • Participates actively in performance review processes.
Practices in accordance with legislative, professional and ethical standards for nursing and cancer care.	<ul style="list-style-type: none"> • Complies with legislation relevant to cancer. • Responds effectively to ethical issues that arise in cancer care. • Practices in a way that acknowledges the impact of cancer on the culture, dignity, values, beliefs and rights of people affected by cancer.



Domain: Critical Thinking and Analysis

This domain comprises competencies that reflect the SCN's ability to practice within an evidence-based framework, participate in ongoing professional development, ensure optimal standards of cancer care and lead the ongoing development of cancer nursing.

Competency Standard	Performance Criteria
Contributes to quality improvement activities aimed at improving outcomes for people affected by cancer.	<ul style="list-style-type: none"> Assesses and critiques cancer care outcomes against established benchmarks, standards and guidelines. Conducts and supports activities that contribute to improvements in safety and cancer care outcomes. Demonstrates the skills and values of critical reflection and lifelong learning to generate knowledge for practice.¹¹
Practices within an evidence-based framework and contributes to the development of evidence for practice.	<ul style="list-style-type: none"> Identifies and appraises research evidence relevant to improving the health outcomes of people affected by cancer. Integrates relevant research findings and other developments in decision making about cancer care.¹¹ Demonstrates high level skills in the use of information technology relevant to cancer nursing and the development of practice. Fosters a spirit of inquiry and contributes to cancer nursing and cancer research.
Embraces continuing professional development to ensure practices that incorporate best available evidence and emerging developments in specialist cancer nursing and cancer care.	<ul style="list-style-type: none"> Uses relevant sources to seek additional information when presented with complex or challenging situations.¹¹ Identifies learning needs through critical reflection, performance review and assessment of emerging developments in the practice of specialist cancer nursing.¹¹ Demonstrates knowledge of relevant professional development resources and activities in specialist cancer nursing.¹¹
Provides advice and mentorship to nursing colleagues and others involved in cancer care to promote optimal standards.	<ul style="list-style-type: none"> Develops and contributes to education and staff development activities relevant to cancer care.¹¹ Provides advice and professional support to nursing colleagues and others involved in cancer care about clinical management and professional issues in cancer nursing.¹¹ Disseminates information about research and other developments in cancer care to nursing colleagues and others involved in cancer care.¹¹



Domain: Provision and Coordination of Care

Provision and coordination of care relates to the coordination, organisation and provision of nursing care. It includes the assessment, planning, implementation, and evaluation of care for people affected by cancer, and consists of these four practice dimensions:

- Disease and treatment related care;
- Supportive care;
- Coordinated care;
- Information provision and education.

• Disease and treatment related care

This dimension comprises competency standards that reflect the SCN's role in reducing risks as well as managing disease and treatment related responses across the cancer continuum. It includes reducing cancer risk, screening and diagnosis, treatment planning, treatment delivery (including participation in clinical trials) and follow up care.

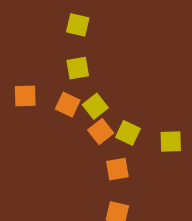
Competency Standard	Performance Criteria
Participates in activities that contribute to reducing the risk of developing cancer and that promote early detection of cancer.	<ul style="list-style-type: none">• Demonstrates an understanding of cancer's epidemiology, risk factors, genetics and prevention strategies.• Provides evidence-based information and education to individuals and groups regarding cancer risk factors and preventive strategies.• Provides evidence-based information to individuals and groups regarding recommended cancer screening programs and tests.• Prepares, supports and monitors people undergoing cancer screening and diagnostic tests.



Domain: Provision and Coordination of Care

• Disease and treatment related care

Competency Standard	Performance Criteria
Identifies potential and actual adverse effects of having cancer and receiving cancer therapies.	<ul style="list-style-type: none">• Demonstrates an understanding of the biology and pathophysiology of cancer, its diagnosis and presentation across the disease continuum.• Demonstrates an understanding of the rationale for and mechanisms involved in cancer therapies and their related clinical effects, both acute and delayed.• Demonstrates an understanding of the implications of participation in cancer clinical trials for a person's care.• Undertakes and documents a comprehensive and timely assessment of current and potential effects and complications arising from having cancer, diagnostic tests and cancer treatments using a systematic, evidence-based approach.• Interprets results of investigations and findings for the person affected by cancer according to needs and preferences, and for other members of the health care team according to clinical requirements.• Anticipates, monitors and responds to potential adverse events associated with cancer and having cancer treatment using evidence-based knowledge.• Communicates effectively with the person affected by cancer and other members of the health care team to facilitate timely and comprehensive assessment and identification of current and potential adverse effects of having cancer and cancer treatment.



Domain: Provision and Coordination of Care

- Disease and treatment related care

Competency Standard	Performance Criteria
Participates in the safe and effective management of cancer and the delivery of cancer treatments.	<ul style="list-style-type: none">• Collaborates with people affected by cancer and other members of the health care team in planning and implementing care to prevent, minimise and manage the acute and delayed effects of having cancer and its treatment.• Demonstrates knowledge of and adherence to treatment protocols and clinical guidelines, including non-pharmacological treatments, in the context of cancer.• Demonstrates safe and effective use of clinical procedures and technologies in the provision of optimum care related to cancer treatment and palliation.• Continuously evaluates the condition and response of the person affected by cancer to interventions in a timely manner, using validated and focused assessment tools.• Modifies the management plan when necessary to achieve optimal health outcomes for people affected by cancer.¹¹

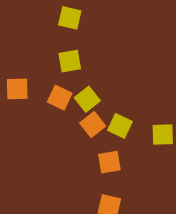


Domain: Provision and Coordination of Care

- **Supportive care**

This dimension comprises competency standards that reflect the SCN’s ability to identify multiple needs across all domains of health throughout the cancer continuum. It includes implementation of evidence-based supportive care interventions in a flexible and responsive manner, in the context of a collaborative interdisciplinary approach to care, to achieve optimal health outcomes.

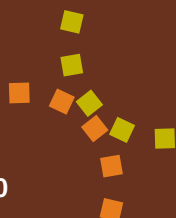
Competency Standard	Performance Criteria
Identifies, validates and prioritises potential and actual health needs across all domains of health of the person affected by cancer across the continuum of cancer.	<ul style="list-style-type: none">• Demonstrates an understanding of the impact of cancer and its treatment on the interrelated physical, psychological, financial, social, sexual and spiritual aspects of wellbeing of the person affected by cancer.• Undertakes and documents comprehensive and timely assessment of current and potential or unpredictable health needs, including co-morbid conditions and support needs across the cancer continuum.• Routinely assesses people affected by cancer for psychosocial risk factors and distress, at the time of diagnosis and on a regular basis using a systematic, evidence-based approach.• Communicates effectively with other members of the health care team and refers appropriately to facilitate efficient, timely and comprehensive assessment and identification of current and potential needs of the person affected by cancer.



Domain: Provision and Coordination of Care

• Supportive care

Competency Standard	Performance Criteria
Effectively provides and ensures access to a range of supportive care services and interventions to meet the multiple health needs of the person affected by cancer.	<ul style="list-style-type: none">• Collaborates with people affected by cancer and other members of the health care team, in planning and implementing care to meet the multiple health and support needs of the person affected by cancer.¹¹• Applies comprehensive knowledge of clinical and supportive care guidelines and evidence in the context of cancer.¹¹• Demonstrates skilled use of therapeutic nursing interventions for meeting the physical, psychological, social, sexual and spiritual needs of the person affected by cancer throughout the disease continuum, including identification of the need for referral for additional support.¹¹• Adapts and prioritises practice guidelines and interventions according to the cultural, spiritual and social contexts and clinical circumstances of people affected by cancer.¹¹• Continuously evaluates the condition and response of the person affected by cancer to interventions in a timely manner and modifies the management plan when necessary to achieve optimal health outcomes.¹¹• Assesses the person's use of and response to complementary and alternative health care practices, as well as possible interactions with standard therapies throughout the cancer continuum.

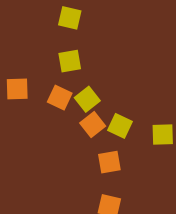


Domain: Provision and Coordination of Care

• Coordinated care

This dimension incorporates competencies reflecting the SCN's ability to facilitate a coordinated approach to care planning, implementation and evaluation by ensuring a comprehensive range of health and support services are delivered by the interdisciplinary team in a timely, flexible and efficient manner in response to the needs of the person affected by cancer.

Competency Standard	Performance Criteria
Coordinates implementation of care across different phases of the cancer journey and across health care settings to facilitate continuity of care and effective use of health care resources relevant to the needs of the person affected by cancer.	<ul style="list-style-type: none">• Develops, implements, documents and continuously reviews a comprehensive care plan incorporating interventions to promote continuity of care.¹¹• Ensures that the person affected by cancer has access to information and resources to enable continuity of their care and facilitate linkages between past, current and future care experiences.¹¹• Promotes the efficient exchange of information between care providers and health care settings regarding the clinical, practical and support needs, preferences and care plans for the person affected by cancer.¹¹• Demonstrates a comprehensive knowledge of health services and community resources relevant to cancer care across the continuum.¹¹• Liaises and collaborates with service providers in various care contexts to facilitate the delivery of services in a coordinated, consistent and timely manner.¹¹



Domain: Provision and Coordination of Care

• Information provision and education

This dimension incorporates competencies reflecting the SCN's ability to provide comprehensive, coordinated, specialised and individualised information and education to the person affected by cancer about the pathophysiology of cancer and its physical and psychological effects, treatment approaches and self-management strategies. The dimension also reflects that the provision of such information and education is based on evidence-based educational strategies that are consistent with the individual's clinical circumstances, preferences, information and self-care needs.

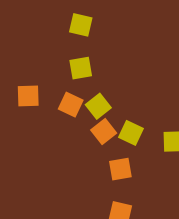
Competency Standard	Performance Criteria
Provides comprehensive and specialised information in a coordinated manner to assist people affected by cancer to achieve optimal health outcomes, reduce distress and make informed decisions.	<ul style="list-style-type: none">• Assesses the understanding of the person affected by cancer of their clinical circumstances, treatment and care plan, and their preference for information.¹³• Uses evidence-based communication skills to provide information, taking into account the individual preferences and responses of the person affected by cancer.• Provides information that reflects knowledge of the pathophysiology and progression of cancer, including the episodic and chronic nature of cancer, and current evidence regarding cancer treatments across the care continuum.¹³• Demonstrates comprehensive knowledge of information resources for the person affected by cancer and facilitates access to resources relevant to their needs and preferences.¹³• Uses a range of evidence-based strategies for delivering, tailoring and reinforcing information and addressing common concerns/myths relevant to the information needs and preferences of the person affected by cancer.¹³• Collaborates with other members of the health care team to ensure a coordinated and documented approach to providing consistent and timely information to people affected by cancer, avoiding duplication and addressing gaps where required.¹³• Clarifies and interprets information gained by the person affected by cancer from professional and public sources regarding cancer and its management.



Domain: Provision and Coordination of Care

• Information provision and education

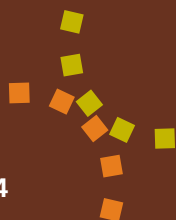
Competency Standard	Performance Criteria
<p>Provides education to the person affected by cancer to enable them to be active participants in their care and engage in self-management of health-related needs where appropriate to achieve optimal health outcomes across the continuum of cancer.</p>	<ul style="list-style-type: none">• Provides information and refers to other health professionals and resources to ensure the person affected by cancer has the capacity to participate in decisions about their treatment and care at all stages of the cancer continuum (including participation in clinical trials), according to their preferences.• Implements evidence-based educational interventions to assist people affected by cancer to develop knowledge, skills and confidence to manage their health needs and the problems associated with cancer and its treatments.¹³• Consults and collaborates with other members of the health care team to facilitate an interdisciplinary and coordinated approach to promoting the ability of the person affected by cancer to self-manage health needs and problems associated with cancer and its treatments.¹³• Continuously evaluates and documents the response of the person affected by cancer to educational interventions and modifies educational strategies when necessary, to achieve optimal health outcomes.¹³



Domain: Collaborative and Therapeutic Practice

This domain comprises competencies reflecting the SCN’s ability to develop effective collaborative relationships with people affected by cancer that will assist to maximise health outcomes, and to establish a collaborative approach to working effectively as part of an interdisciplinary team across the care continuum. These competencies include recognition of the critical interdependence between the roles of the SCN, other health professionals and organisations and the establishment of partnerships with people affected by cancer to maximise outcomes.

Competency Standard	Performance Criteria
<p>Develops therapeutic relationships with people affected by cancer to anticipate and meet their multiple care needs across the cancer continuum.</p>	<ul style="list-style-type: none"> • Uses effective communication skills to establish and maintain therapeutic relationships with people affected by cancer throughout the cancer journey. • Actively explores and documents preferences and decisions of the person affected by cancer regarding care and treatment throughout the cancer journey, while ensuring they have access to appropriate information on which to base their decisions.¹¹ • Promotes the ability of the person affected by cancer to participate in care decisions and self-management of their health needs according to their preferences and resources, recognising that these may change over time. • Collaborates with the person affected by cancer in care planning and implementation to establish therapeutic goals consistent with the person’s needs and decisions.
<p>Initiates and ensures ongoing improvements in collaborative relationships with the person affected by cancer and other members of the health care team to optimise health outcomes.</p>	<ul style="list-style-type: none"> • Actively facilitates the involvement of the person affected by cancer as a partner in the interdisciplinary team.¹¹ • Demonstrates a comprehensive understanding of the roles of the various members of the interdisciplinary team in achieving optimal outcomes for people affected by cancer.¹¹ • Participates effectively in teams to plan and implement strategies to meet the needs of the person affected by cancer. • Uses evidence-based communication strategies that promote the exchange of information about care needs and fosters interdisciplinary clinical partnerships for planning, implementing and documenting cancer care.¹¹ • Initiates and responds to referrals in collaboration with the health care team, according to the clinical needs and preferences of the person affected by cancer.¹¹ • Contributes as part of an interdisciplinary team to the review of individual care outcomes.¹¹



Glossary of Terms

Burden of cancer:

Is the impact of the disease, including its incidence, morbidity, mortality rates and financial impact on the individual and broader community.

Cancer:

Describes a range of diseases in which abnormal cells proliferate and spread out of control. Other terms for cancer are tumours and neoplasm, although these terms can also be used for non-cancerous growths.⁴

Capability:

Refers to the ability of a person or organisation to confidently perform in both familiar and unfamiliar situations. More than just skills and knowledge, it also involves utilising values, judgement, the self-confidence to take risks and an ability to reflect on and learn from practice.¹⁵

Competence:

The ability to fulfil the nursing role effectively, recognising that there are various levels of competence which reflect knowledge, experience and responsibilities. Competence is the combination of skills, knowledge, attitudes, values and abilities that underpin effective and/or superior performance in a profession/occupational area.¹⁴

Competency:

Is an attribute of a person which results in effective performance.¹⁶

Competency Standards:

Refer to expected levels of knowledge, attitudes, skills and behaviours of a nominated role.

Enrolled Nurse or Division 2 Nurse:

A nurse who is licensed under the relevant State or Territory legislation to practice in that jurisdiction. The minimum educational requirement for an enrolled nurse is a one-year diploma from a vocational education and training institution (VET) or equivalent from a recognised hospital-based program.¹⁷

Family:

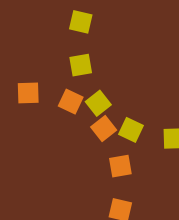
Refers to an identified group of individuals who are bound by strong ties to the person diagnosed with cancer.

Interdisciplinary care:

Is the care provided by an interdisciplinary team. The interdisciplinary team members jointly evaluate or develop a plan of care.¹⁸ Members of an interdisciplinary team operate synergistically rather than in parallel to pool their knowledge in the process of optimising patient care.¹⁹

Interdisciplinary team:

Comprises health care providers with distinct disciplinary training working together for a common purpose.²⁰



Nurse Practitioner:

A nurse practitioner is a registered nurse educated and authorised to function autonomously and collaboratively in an advanced and extended clinical role.¹³

Palliative Care:

Is care provided for people of all ages who have a life limiting illness, with little or no prospect of cure, and for whom the primary treatment goal is quality of life.²¹

Registered Nurse:

A nurse who is on the register maintained by the state or territory nurses' board or nursing council to practise nursing in that state or territory. The minimum educational requirement for a registered nurse is a three-year degree from a tertiary education institution or equivalent from a recognised hospital-based program.¹⁷

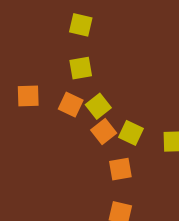
Survivorship:

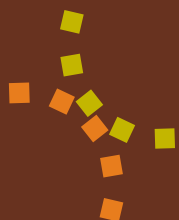
Generally understood to refer to a person who has undergone cancer treatment and is deemed to be free of cancer, usually for a suggested timeframe such as five years. Survivorship however, is a dynamic process as there is no clear 'end' to the cancer illness and it is artificial to consider survivorship as a sequential stage in a cancer journey. Instead, survivorship issues need to be addressed throughout the illness experience.²²



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