

## Developing Outcomes for an Oncology Nurse Internship Program

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Program evaluation is essential for organizations to justify the use of resources in the current healthcare environment. Specialized education programs for nurses require extensive human and facility resources to be successful. Outcome-based evaluation is one method to document success or track process improvement for an identified program. However, developing and applying outcomes that can be measured efficiently, effectively, and economically can be a challenge.

### Background

The National Cancer Institute (NCI) Intramural Research Program developed an oncology nurse training program in 1985. The goal of the program was to prepare new graduates for the specialty of oncology nursing by providing knowledge, clinical experience with preceptorship, and professional development. The program expanded to include collaboration with Nursing and Patient Care Services of the Clinical Center at the National Institutes of Health (NIH). The Clinical Center at NIH is the world's largest hospital devoted entirely to clinical research. Patients who come to the Clinical Center consider enrollment on a clinical research study conducted by 1 of 27 institutes and centers of the Intramural Research Program.

Patients with cancer fill about 25% of the 234 beds at the Clinical Center, with the majority enrolled on protocols from NCI.

Clinical research nurses in Nursing and Patient Care Services support the Intramural Research Program by providing quality care in the context of research studies. To meet new requirements regarding length of time, number of participants, and curriculum, NIH's program was expanded as the Oncology Nursing Internship Program (ONIP), including a full-time position with Nursing and Patient Care Services and curriculum integrating knowledge related to clinical trials and the nurse's role in support and implementation of clinical research. The ONIP faculty consists of clinical nurse specialists (CNSs), nurse educators, NCI nurses and physicians, and community oncology professionals.

Participants for the ONIP are selected by a Nursing and Patient Care Services Internship Candidate Search Committee in partnership with oncology nurse managers. Applicants must have graduated from an accredited school of nursing within the previous 12 months and successfully completed the National Council Licensure Examination. About 6–10 new graduate nurses are hired to work full-time in an oncology

setting while participating in the ONIP. Interns complete a hospital-based and unit-based orientation in addition to specialty oncology training.

The original goals for the ONIP included providing support for the new nurse's role transition; in-depth education about oncologic diseases, process, treatments, oncology clinical trials, and the research process; retention in the oncology nursing specialty; and leadership development. The program included short-term objectives relating to professional growth (self-reported), an increase in oncology knowledge (pretest and post-test), and long-term objectives centered on leadership development. Nursing and Patient Care Services initially lacked a formal evaluation process to measure the programmatic outcomes based on the objectives. In addition, the test scores for knowledge assessment were not meeting the standard set by the department. As a result, Nursing and Patient Care Services established an initiative to evaluate the ONIP and develop outcomes that would address the program objectives

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Digital Object Identifier: 10.1188/08.ONF.753-756

### Leadership & Professional Development

This feature provides a platform for oncology nurses to illustrate the many ways that leadership may be realized and professional practice may transform cancer care. Possible submissions include, but are not limited to, overviews of projects, accounts of the application of leadership principles or theories to practice, and interviews with nurse leaders. Descriptions of activities, projects, or action plans that are ongoing or completed are welcome. Manuscripts

should clearly link the content to the impact on cancer care. Manuscripts should be six to eight double-spaced pages, exclusive of references and tables, and accompanied by a cover letter requesting consideration for this feature. For more information, contact Associate Editor Mary Ellen Smith Glasgow, PhD, RN, CS, at [maryellen.smith.glasgow@drexel.edu](mailto:maryellen.smith.glasgow@drexel.edu) or Associate Editor Judith K. Payne, PhD, RN, AOCN®, at [payne031@mc.duke.edu](mailto:payne031@mc.duke.edu).