Care and Coping During COVID-19

Practice changes and innovations in the oncology setting

Regina Duncan, BSN, RN, OCN®, CNML, Brittany Szabo, MSN, RN, MBA, OCN®, Quincy L. Jackson, MSN, RN, Maria Crain, BSN, RN, BMTCN®, Celia Lett, FNP-BC, AOCNP®, Connie Masters, MSN, RN, MBA, OCN®, Renee Spinks, MSN, RN, ACNS-BC, AOCNS®, Lana K. Uhriq, PhD, MBA, RN, and Mary M. Gullatte, PhD, RN, ANP-BC, AOCN®, LSSYB, FAAN



BACKGROUND: The COVID-19 pandemic has required healthcare systems to transform the delivery of care. Although the core principles of care for patients with cancer have not changed, this pandemic has led to heightened awareness concerning the fragility of patients with cancer and how healthcare systems can protect them.

OBJECTIVES: The aims were to identify and implement inpatient and ambulatory care clinical practice changes during the COVID-19 pandemic, based on defining moments and coping strategies from clinical oncology nurses, advanced practice RNs, nurse leaders, and researchers.

METHODS: This article presents a Lean Six Sigma framework, accompanied by numerous rapid cycle tests of change.

FINDINGS: The COVID-19 pandemic required clinical healthcare providers at the authors' institution to focus on seven priority areas. Nurses tested and implemented practice changes.

COVID-19; coronavirus; personal protective equipment; employee safety; pandemic

DIGITAL OBJECT IDENTIFIER 10.1188/21.CJON.48-55

THE NOVEL CORONAVIRUS WAS FIRST REPORTED in Wuhan, China, in December 2019 (World Health Organization, 2020). Since the virus was reported in the United States on January 21, 2020, there have been almost 24 million total cases and about 400,000 deaths as of this publication (Centers for Disease Control and Prevention [CDC], 2021). There is little current evidence in the oncology nursing literature to address practice changes and innovative strategies for oncology nurses who are both coping and caring during the COVID-19 pandemic (Neal et al., 2020). The revelation that COVID-19 is disproportionately affecting vulnerable populations—particularly the immunocompromised, people of color, and older adults—is of significance in the oncology setting (Shankar et al., 2020). Patients with cancer appear to be especially vulnerable to morbidities and mortality from COVID-19 (Horn & Garassino, 2021).

The acute and critical severity of COVID-19 has challenged the entire healthcare team. Concerns about staff and patient safety have been heightened. Since March 2020, more than 2,900 healthcare workers in the United States have died in the COVID-19 pandemic (Jewett et al., 2020). A reported 30% of healthcare workers with COVID-19 were asymptomatic (CDC, 2020d). Although the safety risk is real for healthcare providers, oncology nurses have demonstrated resilience in coping while caring during this pandemic.

In addition to the challenges of equipment and supply chain shortages and the physical demands of long nursing shifts, there is the task of coping with emotional and physical fatigue. The oncology nurse workforce within the Winship Cancer Institute at Emory University, a National Cancer Institute-designated comprehensive cancer center, spans six hospitals and multiple ambulatory clinics across Georgia and is aligned to achieve cancer care outcomes and high employee safety and engagement. The purpose of this article is to share care innovations and strategies implemented by oncology nurses at the Winship Cancer Institute to improve care and support nurses' coping and resilience during the COVID-19 pandemic.

Methods

Case study methodology and the Lean Six Sigma framework were employed to test practice changes and innovations; these have proven successful in planning and organizing, as well as in improving healthcare processes to