

Developing S.M.A.R.T. Goals to Improve Geriatric Oncology Care Across the Nation

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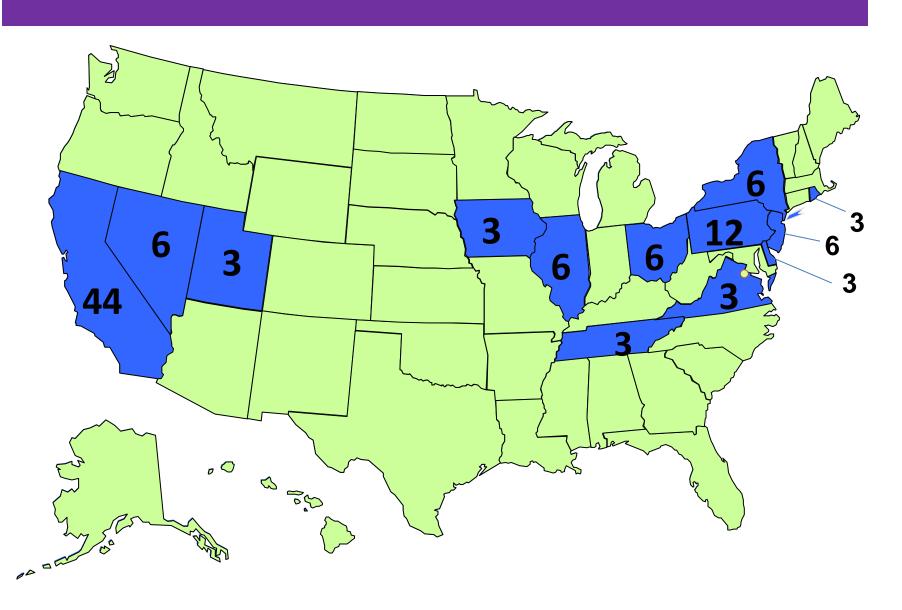
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Background

To meet recommendations of the 2008 Institute of Medicine (IOM) report "Retooling for an Aging America: Building the Health Care Workforce" and the Cancer & Aging Research Group (CARG), an NCI funded R25 was developed to train oncology nurses to incorporate geriatric specific knowledge into their practice. "Geriatric Oncology: Educating Nurses to Improve Quality Care" provides 4 annual courses to Registered Nurse (RN) teams (administrator, educator and direct care nurse). The aim is to educate and support them in building geriatric-focused interventions in their settings.

Course 1 Participants



Theoretical Framework

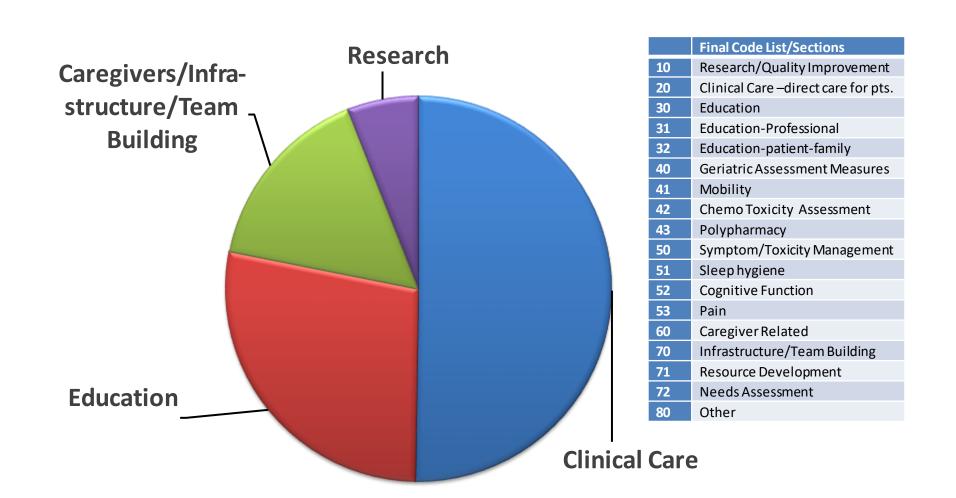
Adhering to the principles of adult learning and combining the NICHE performance measures, the National Consensus Conference on Geriatric Education recommendations, and the defined competency domains for geriatric training. A 2 ½ day curriculum was developed that included qualitative and quantitative data to be followed at 6, 12, and 18 months post course.

Methods

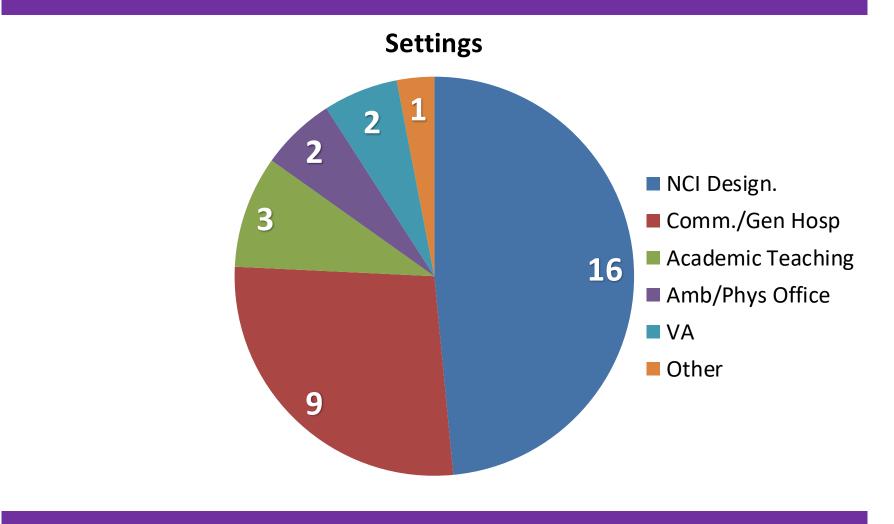
This abstract will report on the qualitative analysis of the post course goals submitted by participating teams for Course 1 using the S.M.A.R.T. goal guidelines. (N=33 teams). Three required goals focused on education, policy or practice changes. Goals were coded using Hyperresearch Qualitative Analysis tool. Themes emerged related to providing geriatric focused environment, educational goals and specific goals to NICHE designation. Goal coding was verified by co-investigators PB, DE and Primary Investigator-AH for inter-rater reliability.



Geriatric Education Course 1 Codes (N=201)



Participant Settings



Acknowledgement

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Results

There were 113 goals created with 201 coded activities

Top 3 planned interventions by participating nurses
included:

- Professional education
- Activities focused on clinical care interventions
- Geriatric assessments focused on mobility assessment and improvement strategies

All goals were aimed at improving geriatric specific symptoms. The goal activities and institutional settings are described at baseline and will be evaluated at 6, 12 and 18 months post course for achievement. This data will be described in the future to identify activities occurring in the different settings over time.

Conclusions and Implications

- There is a growing awareness of the need to implement geriatric focused activities into clinical practice
- These top 3 goals describe the primary concerns of the participating institutions
- There is a recognition that professional education must be provided to assist with implementing changes in practice
- The focus on Geriatric Assessment identifies the understanding of the importance of establishing a baseline of physical needs of the geriatric patient to improve outcomes of care.