Changing Nursing Practice in Survivorship Care With Clinical Decision Tools

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The paradigm shift to include survivorship care as part of the cancer care continuum underscores the critical need for a change in nursing practice. One way to ensure that change in practice is delivered in a safe and efficient manner is through the use of clinical decision tools (CDTs). Such tools can be used to increase relevant knowledge and skills of nurses and patients. Despite the widespread recognition of their value, CDTs to educate providers on cancer survivors' care are limited and, when available, often are not used. Clinical practice algorithms were developed for disease-specific survivorship clinics in a cancer academic center. This article reviews the conceptual framework of the survivorship algorithms, describes the application of the algorithms in multidisciplinary disease-specific survivorship clinics, and discusses the implementation strategies used to promote clinicians' adoption and implementation of the algorithms.

At a Glance
- The authors found that algorithms can be successfully used as clinical decision tools (CDTs) to deliver survivorship care.
- Algorithms and other CDTs are powerful tools to enhance professional practice.
- Additional studies are needed to assess their effect on clinical practice and survivor outcomes.

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The paradigm shift to include survivorship care as part of the cancer care continuum emphasizes the importance of bridging current science with evolving practice (Edwards et al., 2012; Hewitt, Greenfield, & Stovall, 2005). Despite the increasing number of survivors, several unanswered questions remain related to evidence-based care of survivors; in particular, empirical evidence defining best clinical practice is limited. The Institute of Medicine (Hewitt et al., 2005) acknowledged that evidence-based practice is necessary to inform clinicians and patients on best care of long-term survivors.

To provide coordinated and quality care to long-term survivors, oncology nurses and other providers need appropriate education and training resources for this emerging subspecialty. Clinical decision tools (CDTs) are examples of educational resources that can be used to increase relevant knowledge and skills (Eichner & Das, 2010). CDTs are any tool or technique that enhances decision making by clinicians, patients, or their surrogates in the delivery or management of health care (Campbell et al., 2011).

Cancer Survivorship Practice Algorithms

Clinical practice algorithms, hereafter referred to as algorithms, are decision tools used in clinical practice, quality improvement, and coordination of care, and often are intended to serve as evidence-based CDTs (Campbell et al., 2011; Eichner & Das, 2010; Margolis, 1983). In this article, algorithm is used in a global sense to describe tools offered to facilitate delivery of multidisciplinary, site-specific cancer survivorship care. Published evidence is lacking concerning providers' preferences, adoption, implementation, and satisfaction with survivorship algorithms, and such research remains limited in scope (Campbell et al., 2011; Stricker et al., 2011).

In this article, the authors will present the conceptual framework of survivorship algorithms, describe the application of algorithms in multidisciplinary disease-specific survivorship clinics, and assess the adoption and implementation of the algorithms.

Framework of Survivorship Algorithms

The authors' institution identified algorithms as an appropriate means to disseminate and implement evidence-based practice across the institution. The conceptual structure of the algorithms established a broad perspective for managing long-term survivorship care and