

LEADERSHIP & PROFESSIONAL DEVELOPMENT

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Associate Editor

Meeting the Challenges of Providing Ongoing Oncology Nursing Education: Puget Sound Oncology Nursing Education Cooperative

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The Puget Sound Oncology Nursing Education Cooperative (PSONEC) was formed in 1998 to address the need for basic oncology nursing education in the Puget Sound region of Washington State. The 14 founding members of the cooperative believed that by pooling their resources they could create a high-quality basic oncology nursing course that would be far superior to what each member could provide individually. A four-day course, based on content from the *Core Curriculum for Oncology Nursing* (Itano & Taoka, 1998) first was offered in 1998. Since then, the Fundamentals of Oncology Nursing course has been offered 15 times and about 1,600 nurses have attended. Although experienced oncology nurses are welcome to attend the program, healthcare facilities in the region often require completion of the course as part of orientation. Seventy-five percent of the attendees have been nurses with fewer than 12 months of oncology experience.

Purpose

Several years ago, members of PSONEC documented their efforts to found the cooperative (Whipple, Hogeland-Drummond, Purrier, & Tofthagen, 2000). At the time of the original report, the cooperative provided two courses for the oncology nursing community in the Puget Sound area. However, the ongoing issues associated with providing high-quality oncology nursing education on

a continual basis could not be foreseen. The purpose of this article is to discuss the challenges inherent in maintaining the integrity of the course while meeting the educational needs of participants. In addition, the authors will discuss the benefits of a cooperative approach to professional development and the outcomes associated with the Fundamentals of Oncology Nursing course.

Challenges

Four challenges were identified at the inception of PSONEC in 1998: (a) conveying the time commitment associated with participation, (b) maintaining financial viability, (c) finding appropriate facilities in which to conduct the course, and (d) reaching consensus among group members regarding goals, responsibilities, and accountability.

To ensure that time commitments are understood, each member institution is asked to sign a letter of agreement (contract) that describes the responsibilities and benefits of membership. The responsibilities include representation on the committee, major service (e.g., host the course, manage registration, prepare the course syllabus), and provision of expert speakers for the course. The benefit is that nurses from member institutions may attend the course free of charge. The founding PSONEC members devoted a great deal of time to creating a successful foundation. During the planning stages of the program,

they met twice monthly to discuss how the cooperative would function and to plan the first course. After the first few courses were completed, meetings were held monthly. The cooperative currently meets an average of eight times per year, and much of the work is accomplished electronically. The representatives report spending an additional 8.5 hours per month on PSONEC activities, with the majority of the work taking place prior to each spring and fall course.

Maintaining financial viability was another challenge the group faced. PSONEC was not a moneymaking venture but did need to be financially viable and self-sustaining. Wilson and Kluka (1992) described nine budget-conscious strategies for stretching education dollars: Win grants, use vendor support, negotiate for third-party reimbursement (for patient education), charge fees, organize cosponsorships, sell advertising space, use free resources, cut development costs, and delegate to staff. PSONEC has incorporated seven of the strategies into the Fundamentals of Oncology Nursing course. Expenses (e.g., printing, meals, secretarial services, postage, gifts for patient panelists) and revenue sources (e.g., program fees for non-PSONEC members, vendor exhibit fees, sponsorship) have remained fairly stable over time, although the dollar amounts have shifted. The first course was the most expensive (more than \$12,000, including start-up costs). As the founding members gained experience running the course, they found that costs decreased. In 2005, the average expenditure for each course was \$10,500.

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, interviews with nurse leaders, and accounts of the application of leadership principles or theories to practice. 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 Paula Klemm, PhD, RN, OCN®, at klemmpa@udel.edu.

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