Multiple Myeloma Mentorship

Bridging communication and educational gaps

Beth Faiman, PhD, RN, APRN-BC, AOCN®, Sandra E. Kurtin, MS, RN, ANP-C, AOCN®, Jocelyn Timko, BS, and Linda Gracie-King, MS

BACKGROUND: The 2014 Multiple Myeloma (MM) Mentorship Program provided a focused, interactive, peer-to-peer educational experience, including updates in MM, for 10 mentees that led to advanced clinical educator status.

OBJECTIVES: The objective of the program was (a) to improve mentees' knowledge, competency, confidence, and level of performance in the management of MM and (b) to build speaking expertise.

METHODS: From May 2014 to March 2015, 10 mentees were educated on MM with a structured serial learning curriculum. Mentees then presented slide decks, and modular activities were opened to a national audience of professionals. Pre- and post-test surveys were compiled, and a RealIndex[®] composite score was calculated.

FINDINGS: Gains were measured across the curriculum in learning domains of knowledge, confidence, and practice strategy. Pre-/post-test scores show that the mentorship cohort's average scores on knowledge, confidence, and performance were higher compared to the national program.

KEYWORDS

multiple myeloma; e-mentorship; nursing; education; side effects

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SIGNIFICANT CHANGES TO THE MULTIPLE MYELOMA (MM) landscape have occurred since 2003. With six drugs approved since 2012 (i.e., pomalidomide, carfilzomib, panobinostat, daratumumab, ixazomib, and elotuzumab), keeping up to date on drugs to treat MM and the management of side effects is more challenging than ever for general oncology nurses. The 2014 MM Mentorship Program (MMMP) was an online educational activity designed to bridge serial learning activities and independent clinical practice to meet the educational needs of oncology nurses and was modified following feedback from previous mentorship programs (Faiman, 2011; Faiman, Miceli, Richards, & Tariman, 2012). The 2014 MMMP provided a focused, interactive, peer-to-peer educational experience for 10 mentees, leading to advanced clinical educator status, as confirmed by AXIS Medical Education, Inc. The curriculum included activities that focused on the diagnosis and treatment of MM in first-line, maintenance, and relapsed or refractory settings, provided strategies for side effect management, and highlighted the importance of survivorship care for patients with MM.

Background

MM is an incurable, but treatable, cancer of the bone marrow plasma cells and is estimated to have affected about 30,330 new patients in 2016 (Siegel, Miller, & Jemal, 2016). Advances in survival among patients with MM have been observed since 1996, with the overall survival estimated to be 47% at five years (Siegel et al., 2016). With improved survival, patients are challenged by cumulative effects of the disease and treatment, such as peripheral neuropathy, cytopenia, and recurrent infections (Faiman & Richards, 2014).

When Americans were surveyed, nurses were among the highest regarded healthcare professionals in terms of ethics and trust (Riffkin, 2014). With this confidence in care, combined with the first-line nature of the nurse's job responsibilities, nurses commonly identify side effects and follow up on management issues in patients with MM (Kurtin & Faiman, 2013).

The number of quality educational opportunities for nurses and healthcare professionals has declined since 2006, despite an increased need for such activities. These changes are, in large part, because of diminished funding. Education is particularly important as new drugs with sophisticated mechanisms of action become available for administration. In addition, patients with