Clinical Supervision Can Enhance Learning and Provide Support To New Metastatic Breast Care Nurses

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BACKGROUND

- Dedicated metastatic breast care nurse (mBCN) roles have increased across Australia in recent years.
- A pilot metastatic breast cancer nurse training program (MBCNTP) was developed to upskill mBCNs.



learning





3 day Practicum in person or via robot



12 months bi-monthly clinical supervision

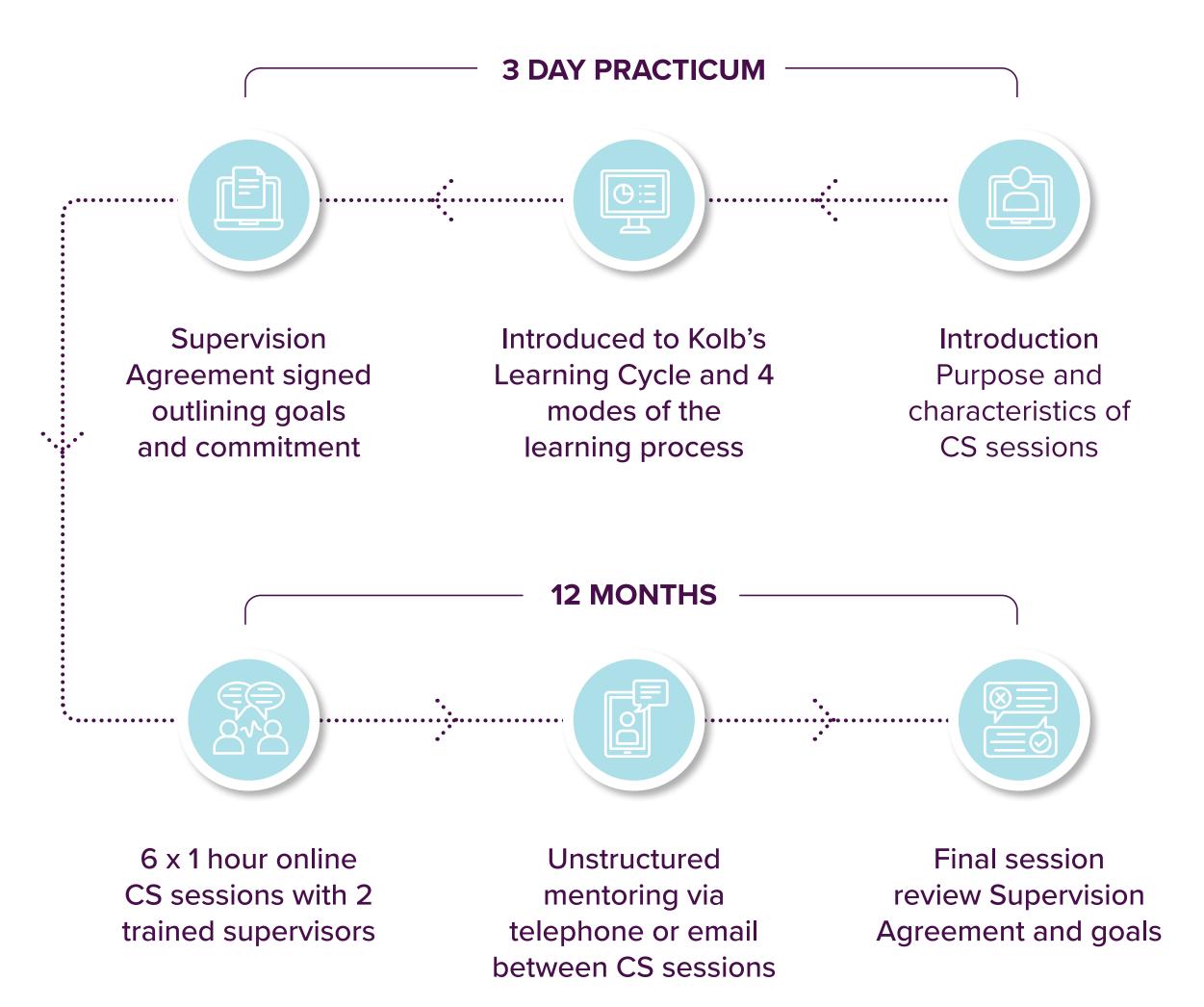
 Clinical Supervision was included in the MBCNTP to provide continued professional development and support.

AIM

To measure the effectiveness of the Clinical Supervision (CS) component of the MBCNTP and explore the expectations, goals and experiences of mBCNs who participated.

METHOD

- Nurses participated in all aspects of the MBCNTP in pairs.
- Clinical Supervision sessions were provided online by two trained supervisors.
- Data was evaluated using a mixed methods approach:
- Manchester Clinical Supervision Scale[©] 26-item version (MCSS-26) comprises six subscales with a total of 26 items scored on a 5-point Likert scale ranging from Strongly Disagree to Strongly Agree
- Semi-structured interviews were conducted at the end of the 12-month period. An iterative process of refining and re-reading the original data was employed, using a realist approach to thematic analysis.



References

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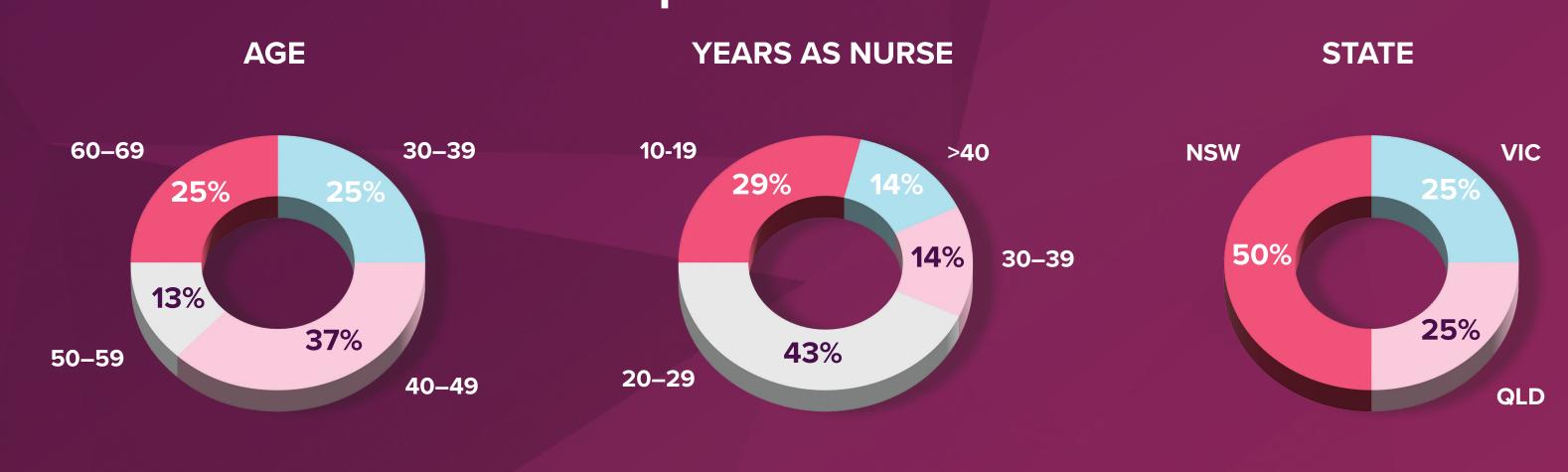






RESULTS

Participant Characteristics



Participants = 8 nurses

MCSS Subscales

MCSS-26 Factor	Number of items	Possible range	Median	Mean	SD
Importance/Value of clinical supervision	5	0-20	18	18.0	2.0
Finding time	4	0-16	10	10.5	2.3
Trust/Rapport	5	0-20	18	17.4	2.9
Supervisor advice	5	0-20	19.5	18.9	1.4
Improve Care/Skills	4	0-16	15	14.6	1.5
Reflection	3	0-12	12	11.5	0.7
Total score	26	0-104	92	90.9	7.9

Topics Covered in Clinical Supervision

Topics	Most frequent	Second	Third	Least frequent	
Staff-related	1	2	2	3	
Patient-related	8	-	-		
Self-related	1	3	3	1	
Work environment related	1	3	2	2	

Key Themes

Theme	Sub-theme	Example participant quote
1. Learning and growth through clinical supervision	1.1 Preparation and goal setting1.2 Reflective practice for learning and development1.3 Benefits of moderated sessions	"it gave you the motivation to set those goals and progress towards them because you had somebody checking in on you every couple of weeks it felt like people were genuinely interested in helping you to achieve something great within your health service." (p4)
2. A shared experience	2.1 Deep understanding of role2.2 Emotional burden of role	"Having that access just to sit down in that really safe supportive environment and just discuss and feel comfortable with that that opportunity for somebody that understands what you're doing" (P8)
3. Embedding clinical supervision into practice 3.1 Maintaining relationships 3.2 Formalising ongoing clinic supervision		"It was professionally something I got a lot out of and will continue to do now as well. I've had my first clinical supervision outside the program. Just to keep that up because that reflective practice was really important and really empowering as well "(P7)

CONCLUSION

Nurses participating in the pilot 12-month CS program highly valued the advice received from supervisors and the opportunity to reflect on their practice, leading to perceived improvement in their skills and care provision.

Other specialist cancer nurses may benefit from having CS embedded into their clinical practice.