## Oncology Nursing in the Acute Care Setting: A Multi-national Volunteer Experience with Health Volunteers Overseas (HVO) in Vietnam

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A team of nurses and physicians from 3 continents came together to present current evidence based practice to nurses, physicians and students in Hue, Vietnam. Facilitated by HVO, physicians from Spain and Australia collaborated with nurses from Australia and the United States to develop and deliver a meaningful curriculum based on the expressed interest of the host facilities.

## Introduction

HVO is a network of health care professionals, organizations, corporations and donors united in a common commitment to improving global health through education. ASCO's support of <a href="Health Volunteers Overseas">Health Volunteers Overseas</a> (HVO), an international medical education organization, provides an opportunity to strengthen cancer care medical centers in low-resource countries. By volunteering for HVO's education and training programs through the International Cancer Corps, oncology professionals can share their medical expertise and build long-term, supportive relationships with the clinicians who provide cancer care in these countries. My professional development through ONS fostered the confidence to join ASCO which led to this opportunity. This experience altered my understanding of culturally competent care by adding the awareness of context to the ever-present concepts of autonomy, personal belief systems, and patient centered care.





	HOSTS	GUESTS
Participants	Dr. Cau, Madame Hoa, Dr. Dung, Dr. Thuy, Professor Ton, Dr. Duy et al	G. Jean Logan, DrNP(c), MSN, United States; Meg Plaster, MSC, BSc, Australia; Dr. Matthew Links, Australia & Dr. Manuel Constenla, Spain
Goals & Expectations	Gain knowledge Confirm current practice Identify areas for improvement Build relationships	Offer expertise Model interdisciplinary care Educate Identify further needs.
Pre-conceived Nursing Practice Paradigms	Nurses don't engage patients Nursing over extended Limited role definition Limited palliative care Safe handling of chemotherapy	Novice nursing practice Lack advanced knowledge Lack resources Absence of palliative care Unsafe chemo-handling environment and practice Consistent resources between hospitals
Observed Practice	Task oriented nursing assignment Perceived lack of nursing assessment skills	Unrecognized level of interaction with patients Well developed palliative care in-patient program at Hue Community Hospital absent from Hue University Hospital Inconsistent resource access due to political/government structure
Curricula		Palliative Care Safe handling of chemotherapy Patient Education Interdisciplinary Care of the Oncology Patient
Opportunities for further education	Nursing assessment Interdisciplinary care methods Community based palliative care Improve communication between physicians and nurses.	Identify methods to incorporate pt. teaching with nursing interactions Community based palliative care Raise level of awareness of nursing role in patient outcomes Consistency in nursing assessment Improve communication between nurses and physicians

## **Outcomes**

Expanded understanding of culturally competent care Improved safe handling of chemotherapy Identified nursing assessment skills taught in the existing nursing curriculum Recognized impact of palliative care r/t pt. outcomes Improved understanding of patient education as interdisciplinary responsibility

Expanded understanding of the role of nursing assessment.

## Acknowledgements

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