Adolescents and young adults (AYAs) with cancer aged 15–39 years have unique psychosocial, informational, and medical concerns compared to their older adult and pediatric counterparts. Recognizing the gaps in young adult cancer care, an AYA program was launched at a large tertiary cancer center to optimize the AYA cancer care experience. This article describes the contributions of a clinical nurse specialist in AYA program development.

AT A GLANCE

- The needs of adolescents and young adults (AYAs) with cancer are not routinely identified and addressed in adult cancer care institutions.
- Clinical nurse specialists (CNSs) are particularly suited to influence AYA care through several domains of program development: clinical care, education, leadership, and evaluation.
- The diverse expertise of CNSs can enhance nursing knowledge on key AYA issues and significantly influence AYA care in the areas of fertility, sexual health, social support, and exercise.

Addressing needs and optimizing care with a clinical nurse specialist

Laura Mitchell, RN, MN, CON®
Terri Stuart-McEwan, RN, MHS, CHE
Hayley Panet, MHSc
Abha A. Gupta, MD, MSc, FRCPC

Faced with cancer, adolescents and young adults (AYAs) (aged 15–39 years) have different psychosocial and medical needs than their adult counterparts (Ferrari et al., 2010). These needs include information on topics such as fertility, sexuality, body image, nutrition, and exercise (D’Agostino, Penney, & Zebrack, 2011; Gupta, Edelstein, Albert-Green, & D’Agostino, 2013). When these unique needs are not met, AYAs experience higher distress during their cancer journey (Williams, 2013). Recognizing this gap in care, the University Health Network Princess Margaret Cancer Centre (PM) launched an AYA program in 2014 to optimize the AYA cancer care experience and address the needs of this population. The program was led by a clinical nurse specialist (CNS), a medical director, a clinical director, and a project team that provided mentorship to the CNS during the early stages of program development.

CNS practice is balanced between four key competencies: clinical care, education, leadership, and research. The role has been instrumental in developing and integrating the key domains of the AYA program:

- Patient consultations in which AYAs’ unique needs are addressed
- Provider education on important AYA issues (fertility, sexual health, and AYA-specific resources)
- Leadership activities (program awareness, partnership building, and resource development)
- Program evaluation (Canadian Nurses Association [CNA], 2014).

This article describes the unique contributions of the CNS in AYA program development, as well as the roles and preliminary outcomes of the CNS within each domain.

Clinical Nurse Specialist Role in Program Development

Clinical Care

The CNS provides consultations using an evidence-based tailored assessment guided by a screening tool created by the PM AYA Program (CNA, 2014) (see Figure 1). This tool triages patient concerns and supports assessment and interventions by the CNS, including education and navigation to hospital- and community-based programming. The CNS offers psychosocial support and makes referrals to other specialized services. AYAs may be referred to the program at any time during their illness trajectory, but the CNS typically encounters them at the time of diagnosis.

Those with complex needs are offered follow-up appointments every eight weeks to monitor intervention outcomes (CNA, 2014). Through collaborations with internal psychosocial programming, the CNS is skilled in triaging patients to the appropriate counseling service. The program was initially piloted in the hematology site and has been sequentially rolled out across all disease-specific sites.

Provider Education

To better understand the learning needs of nursing staff on AYA-related issues, baseline

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