

SWOG

NURSING COMMITTEE

MANUAL

First Edition: 1990
Revisions: 1991, 1993, 1996, 2000, 2007, 2011

Southwest Oncology Group Nursing Manual

Present Contributors

Dorothy Coleman, RN, MSN, CCRP
Tanya Brubaker, RN, MBA
Rose Ermete, RN, BSN, OCN, CCRP
Lisa Hansen, RN, MS, AOCN
Patra Grevstad, RN, MN, OCN
Karen Mack, RNP, BSN, OCN, CCRP
Cecilia Petrowsky, RN, MSN
Nancy Sprouse, RN, BSN, BS

Previous Contributors

Donna Berry, RN, PhD, OCN
Maggie Clarkson, RN, MSN
Marilyn Davis, RN, MSN, OCN
Shirley Emily, RN, OCN
Marge Good, RN, BSN, MPH, OCN
Marcia Grove-Conrad, RN, MSN, MPH, OCN
Kathy Hayden, RN, BSN, OCN
Tessie Jones, RN
Peggy Morgan, RN, BSN, OCN
Jean Parzuchowski, RN, MS
Susan Penny, RN, MN, OCN
Shirley Raltz, RN, MSN
Sandra Remer, RN, OCN
Pamela Rosse, RN, MS
Carolyn Schmidt, RN, MS, OCN
Denice Sheehan, RN, BSN, OCN
Judy Shell, RN, MSN, OCN
Deborah Ward, RN, AOCN, MSN
Pam Williams, RN, MSN, CCRA
Barbara Zorn, RN, BSN, FNP, OCN

SWOG Nursing Manual Table of Contents

Southwest Oncology Group	4
SWOG Nursing Committee	5
Nursing Committee Executive Board	6
Mission Statement & Strategic Plan	7
Administrative Job Descriptions	8
SWOG Nursing Subcommittees	
Disease Liaison Subcommittee	11
Education Subcommittee	14
Membership Subcommittee	17
Executive Liaisons	
Cancer Control & Prevention	19
Symptom Control and Quality of Life	20
Chemoprevention	20
Molecular Epidemiology	21
Health Outcomes & Comparative Effectiveness Research	21
Cancer Survivorship	22
CCOP Liaison	22
Pharmacy Liaison	23
Quality Assurance Liaison	23
Appendices	
A. Membership Application	26
B. Getting through First SWOG Meeting	27
C. Disease Liaison Forms	<i>(In Revision)</i> ... 28
D. Fast Fact Sheet	29
E. Call for Abstract & Posters	31
F. Executive Nursing Committee 6 mo Report	32
G. Executive Committee Roster	33
H. SWOG Nursing Committee History	35

SOUTHWEST ONCOLOGY GROUP (SWOG)

The Southwest Oncology Group (SWOG) was established in 1956 to coordinate and facilitate the conduct and dissemination of oncology research. Over the past five decades, a multi-disease, multi-modality focus has evolved. The organization now consists of over 30 full member institutions and more than 25 Community Clinical Oncology Programs (CCOPs), and a over 100 Outreach Programs called Affiliates. In addition, there are over 300 sites functioning as network components under the auspices of these Member, CCOP or Affiliate Program institutions.

SWOG's organization structure was developed to permit rapid and coordinated implementation and analysis of oncology research protocols.

There are three major types of committees within SWOG:

Disease and Research Committees: The Disease and Research Committees are responsible for the definition of scientific programs and priorities. The development and review of protocols are coordinated through these committees

Administrative Committees: The Administrative Committees provide discipline specific scientific consultation to Disease and Research Committees, assure quality control of data within the respective discipline, offer relevant educational programs, and provide administrative support to the Group membership.

Scientific Advisory Board: This board provides scientific and administrative direction to the Group and advises on strategic planning.

SWOG activities are coordinated at three offices. SWOG Headquarters is the administrative and fiscal center for the Group. Headquarters is housed in Ann Arbor, MI. The Operations Office is the communications hub of SWOG and is located in San Antonio, Texas. Staff at Operations coordinates the review of concept sheets and protocols with the National Cancer Institute. The Biostatistical Center is located in Seattle, Washington. It is involved in each stage of protocol development and is responsible for the coordination and performance of all statistical aspects of SWOG studies.

SWOG Nursing Committee

The Nursing Committee (NC) is an administrative committee. The general membership consists of over one hundred members who represent a broad scope of practice and varied levels of education and experience. One focus of the NC has been the education of nurses and the general SWOG membership related to patient response to cancer and its treatment. Another focus has been scientific collaboration of nurses with Disease and Research Committees to address quality of life, recruitment and retention, and symptom management research. Finally, quality assurance activities such as the Nurse Auditor Program, Nurse QOL coordinators, and the Drug Manual round out the activities that the NC provides to SWOG.

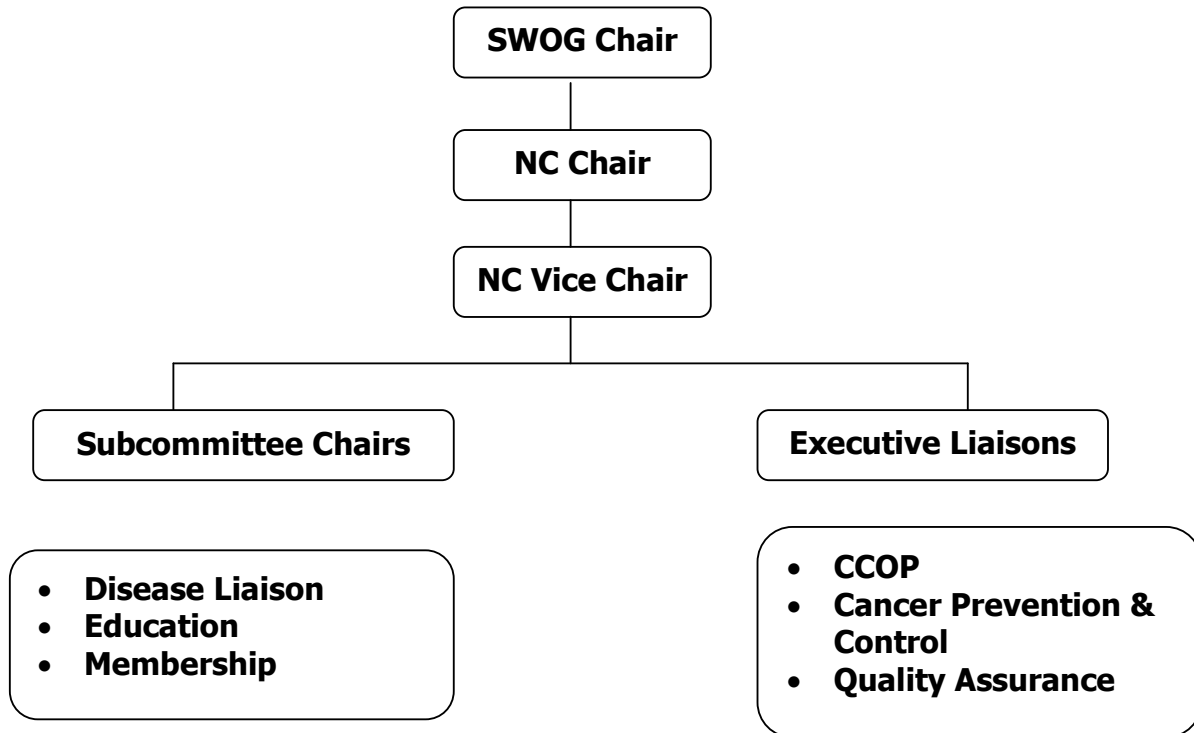
A Chair and Vice-Chair coordinate the NC with the direction and priorities guided by the Executive Board. The Chair is a member of the SWOG Board of Governors. Intramural and extramural consultants provide valuable input and support to the NC on an ad hoc basis. The Executive Board conducts two semi-annual planning sessions. The NC Strategic Plan is reviewed and updated by each subcommittee. Future projects are discussed and integrated into the strategic plan.

Please note:

All nurses are encouraged to actively participate in one or more of the nursing subcommittees. Membership responsibilities, such as attendance at meetings, vary with each subcommittee in accordance with its tasks and needs. Specifics can be addressed by the subcommittee Chair or by referring to the Southwest Oncology Group Nursing Manual. Active participation and support of the SWOG Nursing Committee is required to maintain a viable group and is greatly appreciated.

Nursing Committee Executive Board

- Makeup:* The Executive Board is made up of the Committee Chair, Vice-Chair, Subcommittee Chairs, and Executive Liaisons.
- Function:* The Executive Board provides leadership to the NC and meets on a biannual basis to assess progress toward strategic goals, discuss current and future projects, and make decisions regarding future activities, goals and directions of the Nursing Committee.
- Strategic:* The Executive Board has developed a Mission Statement and Strategic Plan that outlines the goals and functions of the Committee.



SWOG Nursing Committee

MISSION STATEMENT & STRATEGIC PLAN 2011

The mission of the Nursing Committee is

To support SWOG group activities through promotion of integrity and excellence in clinical research nursing practice through education, quality assurance & collaborative contributions to SWOG.

Goals & Objectives

- 1) Support the overall mission of SWOG with respect to ongoing protocol development and patient recruitment to clinical Trials
 - a. Assign one to two liaisons to each disease committee
 - b. Provide at least one qualified Quality of Life (QOL) Coordinator to each protocol-containing patient reported outcome Questionnaires.
 - c. Conduct a survey to assess interest in nursing research within SWOG.
 - d. Develop an educational program based on best practices in patient recruitment.
- 2) Provide quality educational opportunities for SWOG nurses on topics relevant to cooperative group research and the mission of SWOG.
 - a. Provide a Nursing Workshop with Continuing Educational Units at each group meeting.
 - b. Submit a nursing article to the SWOG newsletter at least 8 times a year.
 - c. Identify at least two needs of quality assurance auditors.
 - d. Collaborate with pharmacy committee to maintain drug monographs.
- 3) Strengthen membership and participation within the Nursing Committee
 - a. Increase Nursing Committee membership by 10%
 - b. Provide each new nursing committee member with information on the Clinical Trials Nurse mentorship program.
- 4) Ensure that the SWOG Nursing Committee operates with effective and efficient leadership.
 - a. Evaluate & Update the NC Mission annually
 - b. Maintain a balanced budget that supports the NC Activities
 - c. Inform Nurse Executive committee of changes in Health Policy/Regulations at biannual meeting.
 - d. Identify and mentor at least one qualified nurse annually for future leadership within the Nursing Committee.

SWOG Nursing Committee Administrative Job Descriptions

Chair and Vice-Chair:

Purpose: To ensure that the SWOG Nursing Committee operates in an effective and efficient manner in executing the mission and goals of the committee and support of SWOG.

Responsibilities:

- Plan, develop, implement, and evaluate actions that enable NC members and SWOG membership at large to respond to group and national cancer research initiatives
- Coordinate committee business to include strategic planning, setting goals/objectives of the NC and facilitating collaboration with other SWOG committees
- Collect and maintain documentation of NC activities and accomplishments. Submit reports as required to SWOG leadership and National Cancer Institute
- Prepare Committee Continuation Reports and defend Committee at NCI Site visit as requested.
- Monitor the financial status, develop budgets, and administer funds of the NC
- Monitor legislation and health policy as it affects SWOG activities
- Collaborate with other nursing and research organizations as appropriate in support of SWOG Group mission

Vice Chair:

Additional responsibilities:

- Record minutes at the Nursing Executive Committee Meetings
- Submit completed meeting minutes to Nursing Committee Chair for review and distribution to Executive committee members within one month of meeting
- Document any corrections to minutes and their approval
- Identify contributors to the SWOG monthly Newsletter
- Maintain Committee roster
- Maintain, review and update Nursing Manual on annual basis
- Maintain computer file of previous Nursing Executive Committee Meeting minutes for 6 years

Historian:

Purpose: To provide a secure location and inventory of historical documents, reports, educational material and memorabilia of the Nursing Committee.

Responsibilities:

- Develop and maintain an inventory of archival material from activities of the Nursing Committee
- Provide a secure location for archival material
- Serve as an information resource to SWOG members relating the history, development, and activities of the Nursing Committee
- Retrieve historical information from archives as requested by Nursing Executive Committee members to facilitate completion of reports, updating Nursing Manual, and grant applications

Nursing Executive Subcommittees

Disease and Discipline

Purpose: To provide nurse liaison support to each Disease & Discipline Committee within SWOG; to maintain a procedure for ongoing review of all new protocols, concept sheets, manuscripts and publications (as they are made available); to identify and develop and monitor research activities related to symptom control, survivorship and Quality of Life endpoints; and provide direction to nurses interested in nursing research concept development.

Education

Purpose: To provide educational opportunities and resources for SWOG nurses on topics relevant to cooperative group research and the mission of SWOG. Standing Ad Hoc Committees include program & quality assurance. Temporary task forces are formed as needed for various committee tasks and projects.

Membership

Purpose: To coordinate and recruit membership in the Nursing Committee and Subcommittees. This includes maintenance of membership rosters, coordination of membership applications with the Operations Office, enhancing awareness of subcommittees and their needs, informing chairpersons of new members and providing mentorship information to new members.

Executive Liaisons

Purpose: To provide Nursing Committee members with a resource person at the Operations Office. This resource person's role is to facilitate communication between Committee members and Operations, and to provide assistance and information needed by members to develop and implement programs and procedures specific to their Committee's goals.

CCOP Liaison

Purpose: To provide a means of communication/networking between SWOG CCOP nurses in an effort to problem solve and therefore produce continued quality patient care and data management with the ultimate goal of improving/maintaining job satisfaction.

Quality Assurance Liaison

Purpose: To serve as a resource to the SWOG Quality Assurance Committee, and a means of communication between the two committees.

Cancer Control and Prevention Committees Liaison

The Cancer Control and Prevention (CCPC) program was restructured in 2008, resulting in five new multidisciplinary committees.

Protocol capsules originating in administrative committees (such as Nursing,) are developed, reviewed, finalized and approved within the CCPC or the appropriate disease committee (if disease site-specific). Nurse-generated research in symptom management, quality of life, and cancer survivorship is reviewed and developed in the appropriate CCPC Committee. Nurses contribute to

protocol development in CCPC committees and serve as Nurse/Quality of Life Coordinators for studies that include patient reported outcome questionnaires.

a. Symptom Control and Quality of Life Committee

Mission: To identify disease- and treatment-related symptoms and other dimensions of the patient's quality of life that, if ameliorated or prevented from occurring through interventions, can result in more efficacious treatment of the patient's cancer.

b. Chemoprevention Committee

Mission: To develop and test strategies that will decrease the incidence of cancer.

c. Molecular Epidemiology Committee

Mission: To seek opportunities for harnessing prevention and therapeutic trials for the conduct of ancillary research, particularly that based upon use of biologic specimens.

d. Health Outcomes and Comparative Effectiveness Research Committee

Mission: To make progress in eliminating cancer health disparities and improving quality of cancer care through clinical, epidemiologic and translational research, with the ultimate goal of improving cancer outcomes.

e. Cancer Survivorship

Mission: To conduct research that examines and addresses the long- and short-term physical, psychological, social and economic effects of cancer and its treatment among survivors of cancer and their families.

f. Pharmaceutical Sciences Committee

Mission: To serve as a resource to SWOG for pharmaceutical issues including investigational drugs, drug interactions, safe administration, and symptom management.

SWOG NURSING SUBCOMMITTEE

Disease Liaison Subcommittee

Purpose:

To provide a mechanism for formal participation of nurse disease liaisons in new and ongoing protocol development and implementation through review of protocol eligibility criteria, study parameters, treatment plans and consent document for consistency, clarity, and completeness.

To provide a brief and consistent overview of protocol and treatment via a Fast Fact Sheet.

To provide a mechanism for ongoing nurse liaison input regarding activated protocols and protocol related issues as to quality control, patient recruitment, education, and support.

To assure quality and timely data collection for protocols with patient self reported measures through the roles of the Nurse Quality of Life Coordinator.

To identify specific nurse researcher/patient education issues as they may pertain to therapeutic and cancer control protocols under review.

To provide improved communication between the Disease and Discipline committees, other SWOG Nursing Subcommittees, the SWOG Clinical Research Associates Committee and collaboration with nursing committees of other cooperative groups.

Objectives:

Define and provide complete nurse/liaison representation to each Disease Committee within the Southwest Oncology Group.

Train nurse liaisons, or other interested nurses, to function as Nurse Quality of Life (QOL) Coordinators; assigned coordinators to trials with QOL and other patient self-report measures; support coordinators in their roles; and promote the role of the Nurse QOL Coordinator as an integral member of the protocol management team.

Maintain procedure for ongoing nurse/liaison review of all new protocols, manuscripts and publications (as they are made available); and to develop Fast Fact Sheets for SWOG protocols.

To identify, develop, and activate quality assurance and health outcomes research activities.

Responsibilities and Activities:

1. **Maintain knowledge base relevant to designated Disease Committee.** Review and be current with:
 - a. Study Reports (agenda), meeting minutes, Disease Committee protocol priority listings
 - b. Current therapeutic, cancer control and health outcomes research protocols
 - c. Manuscripts and publications for ongoing and completed studies (as they are made available)
 - d. Major principles of disease diagnosis, staging, treatment and education for designated Disease & Administrative Committee

2. **Health Outcomes Research:** Participate in the identification and actuation of health outcomes research and education protocols in collaboration with the nurse Liaison to the Cancer Control Research Committee, and Behavioral and Health Outcomes Subcommittee:
 - a. Report on and support publication of ongoing and completed health outcomes/education protocols
 - b. Assist nurse researcher/educator in the development, actuation or evaluation of a health outcomes/education protocol
 - c. According to established procedures, adhere to all indicated deadlines when responding to protocol, concept sheet, manuscript and publication reviews or communications
 - d. Following attendance at Disease committee meeting, prepare a summary of issues pertinent to nurse liaisons and / or nurse researchers and educators and submit the same to the Chair of the Disease Liaison Nursing Subcommittee for distribution to all nurse liaisons and others as deemed appropriate
 - e. Complete a summary sheet of activities to be submitted to the Chair of the Disease Liaison Nursing Subcommittee at least one month prior to each SWOG meeting. This information will be included in the Nursing Committee's progress report

3. **Process for Cancer Control Nursing Research Capsule:**
 - a. All investigators must complete the web-based SWOG Study Coordinator's Workshop before they can serve as a study coordinator on any SWOG study
 - b. SWOG Policy 13 – Protocol Guidelines describes the process for development of a SWOG study from the initial proposal or capsule phase through protocol development.
 - c. Nurse Investigators will discuss ideas, potential study design, and or pilot study with Disease Liaison Chair and Cancer Control Liaison
 - d. Disease Committee chair may request presentation of proposal and / or pilot data subcommittee meeting held during the SWOG Group Meeting
 - e. Disease Liaison Committee may recommend discussion or review with appropriate Cancer control and Prevention Committee
 - f. If a Cancer Control Research capsule is requested by the Cancer Control and Prevention Committee, the nurse investigator will develop a brief study capsule to submit to the CCPC leadership and relevant CCPC Committee members following SWOG Policy 13

4. **Protocol Reviews:** *(See Appendix B, Forms Section, for a copy of the "Nurse Liaison Protocol Review" instructions and forms.)*
 - a. Review all new protocols according to established Southwest Oncology Group procedures, adhering to the deadlines indicated
 - b. Carefully review the entire protocol as set forth in the Disease Liaison Protocol Review Guidelines and submit responses on the Nurse Liaison Protocol Review form to the protocol coordinator
 - c. Create a Protocol Fast Fact Sheet for each therapeutic protocol being reviewed in its first draft based on the approved format and according to the approved Procedures for Southwest Oncology Group Protocol Fast Fact Sheet guidelines (see instructions below)
 - d. If applicable, identify and develop a nursing research question that could be incorporated into proposed protocols

5. **Disease Committee Meetings:**
 - a. Nurse Liaisons should have the capability to serve in this capacity for a minimum period of two years
 - b. Nurse Liaisons are strongly encouraged to attend a minimum of one Disease Subcommittee meeting annually

- c. Nurse Liaisons are strongly encouraged to attend their designated Executive Disease Committee meeting if scheduled, including phone conference calls

6. **Reporting Mechanisms:**

- a. Submit a report of semi-annual nurse liaison activities to the Chair of the Disease Liaison Subcommittee at least one month prior to a scheduled SWOG meeting
- b. Maintain a log of all interactions and communications with Committee Study Coordinators, SWOG Operations and Statistical Office personnel, and other individuals, as it is applicable in the role of the nurse liaison
- c. Maintain a cooperative relationship with primary contacts required in this role (i.e., Study Coordinators, Nursing Subcommittee, SWOG Operations and Statistical Office personnel, Clinical Research Associate committee) and seek appropriate assistance when mandated

7. **Education / Orientation:**

- a. Maintain a list of references related to disease, diagnosis, staging, evaluation treatment and published SWOG studies for designated committee
- b. Review and be familiar with SWOG Policy #13, SWOG Protocol Guidelines: General Information for Protocol Format, Development and Administration

SWOG NURSING COMMITTEE

Education Subcommittee

Purpose:

To provide quality educational opportunities for SWOG nurses on topics relevant to cooperative group research and the mission of SWOG.

Provide a mechanism for the assessment, development, evaluation and distribution of education materials, tools and other resources for oncology clinical trials nurses.

Objectives:

Provide a Nursing Workshop with CEU's at each group meeting.

Submit a nursing article to the SWOG newsletter at least eight times a year.

Assist in the development of at least one quality assurance tool for SWOG nurses.

Collaborate with Pharmacy Committee to maintain Drug Monographs for medications utilized in group-sponsored protocols.

Responsibilities & Activities:

1. Chair Activities:

- a. Encourage membership and active participation within the committee
- b. Draft and submit to chair of nursing Committee strategic goals, and objectives for committee
- c. Maintain active communication with members of committee
- d. Assure for succession planning of positions within the committee
- e. Encourage and foster collaboration with other committees within SWOG
- f. Set agenda for subcommittee meeting
- g. Distribute minutes for subcommittee meetings
- h. Encourage collection and assessment of educational tools
- i. Submit a biannual summary of all education subcommittee activities for the 6-month progress report, at least 1 month before the biannual meeting

2. Bi-annual Educational Programs - *The Program Coordinators will:*

- a. Identify a topic and draft an agenda within 4 months prior to the meeting based on prior evaluations, or nursing committee identified needs.
- b. Identify and confirm qualified speakers to present at workshop and provide;
 - Speaker letter to include deadlines
 - Information on travel
 - Obtain biographical sketch and conflict of interest forms
 - Collect slide presentation at least 4 weeks before meeting and forward to meeting manager for posting on the web
- c. Submit complete application for Nursing Continuing Education Units (CEU) 8 weeks prior to the meeting
 - Inquire from other subcommittees if CEU eligible education will be offered at afternoon breakout sessions.
- d. Collaborate with meeting manager to:

- Coordinate payment for CEUs
 - Arrangement for room and audiovisuals
 - Compilation of handouts to be posted on the SWOG website
 - Provide Evaluations and Certificates to SWOG prior to meeting, for copying
 - Discuss if there are funds available to provide food
- e. Submit a newsletter article highlighting the program prior to the bi-annual meeting, with required wording of CEU provider
 - f. Prepare and monitor sign in sheets
 - g. Distribute Nursing CEU Certificates & SoCRA attendance Certificates to attendees who return an evaluation
 - h. Moderate the program and assure for a tech support throughout
 - i. Compilation of evaluation responses, and submit summary evaluation to CEU provider within required time frame
 - Submit thank you letters with evaluation to each speaker
 - Collect and report attendance to meetings manager
 - Maintain a EU file for five years after each approved meeting, that contains: Sign in sheets, evaluations, handouts
 - j. Submit to Nursing Committee Chair a formal report of all programs and evaluations two weeks following each biannual meeting.
 - k. Submit a Newsletter article summarizing the program for the next newsletter after the meeting
3. Poster/Podium Presentations:
- a. Encourage membership to submit and present poster/podium presentations at breakout sessions at biannual meeting
 - b. To present a poster, call or email the chair of the education committee (*See Appendix E, "Call for abstracts/Posters" form*)
 - c. The deadline for registering to present a poster is approximately four months prior to the group meeting. This allows time for the education subcommittee to notify the program coordinators, to request Continuing Education Units.
 - d. The following guidelines have been established to assist nurses in developing and presenting a poster:
 - Poster should be approximately 4' X 6'
 - A handout is recommended, and can be used in place of the actual poster
 - Bring the poster to the assigned breakout session
 - Velcro tape or push pins may be used to anchor the poster to the assigned location
 - Author and institution should be identified on the poster
 - e. Provide a list of poster presentations for each meeting to education subcommittee chair
4. Newsletter Submissions:
- a. Submit at least two articles per year for the SWOG Newsletter
 - b. The Vice Chair of the Nursing Committee will maintain a master list of members and topics assigned for each month

- c. A reminder will be sent to members agreeing to write articles by the first of the month prior to the due date
 - d. The chair of the nursing committee shall be notified if an author cannot meet the deadline
5. Pharmacy Collaboration:
- a. Pharmacy liaison will collaborate with the pharmacy committee to address nursing related issues
 - b. Pharmacy liaison will attend Drug Monograph meetings, and assist in the creation of Drug Monographs for the SWOG Drug Manual
 - c. Submit a six month report to the chair of the education subcommittee
6. Nurse Quality Assurance Auditors:
- a. The Quality Assurance Liaison will collaborate with the Quality Assurance Committee to assist in identifying and trouble shooting common issues found at the time of audits
 - b. Identify learning needs of nurse auditors, and share with Quality Assurance Committee
 - c. Assist in the development of tools for nurse auditors
 - d. Assist in the development of education to enhance the quality of data collection, patient and family education, and nursing care of clinical trial patients.
 - e. Submit a six month report to the chair of the education subcommittee

SWOG NURSING COMMITTEE

Membership Subcommittee

Purpose:

Strengthen membership and participation within the Nursing Committee.

Objectives:

Increase Nursing Committee Membership by 5%.

Provide each new nursing committee member with information to participate in the clinical trials nurse mentorship Program.

Responsibilities and Activities:

1. Increase Nursing Committee membership
 - a. In collaboration with SWOG Operations office, maintain an up to date list of nursing committee members
 - b. Develop and distribute letter/email related to the nursing committee to nurses within SWOG
 - c. Post electronic membership application in forms area of SWOG website
 - d. Annually update and post membership brochure on web
 - e. Explore/develop process for identifying RN's as they become members of SWOG
2. Coordination of Membership Approval (See Appendix A, for a copy of the Membership Application Form)
 - a. Provide membership application at the SWOG bi-annual meeting and on SWOG's website
 - b. Review application for completeness and to assure that new applicant meets criteria for membership
 - c. Distribute application for voting to Nurse Executive Committee
 - d. Collaborate with the Operations Office regarding implementation of procedures
 - i. Maintain a current list of all present members
 - ii. Notify Operations office of new member approvals
 - e. Coordinate membership for the Education and Disease Liaison subcommittees as well as Quality of Life Coordinators
 - f. Provide new members with a welcome packet
 - g. Complete six month progress report and submit to chair of nursing committee within 1 month before biannual meeting
3. Mentorship Program
 - a. Include information in the welcome packet on the Clinical Trials Nurse Mentorship Program through ONS.
 - b. Provide each new member the website and pass codes for mentor & mentee
 - i. <https://www.3creekmentoring.com/ONS/index.cfm>
 - ii. Mentor Code: 361812
 - iii. Mentee Code: 532398

- c. Follow up with mentorship program coordinator at ONS as to number of mentor/mentee matches. Include this information in six month progress report
 - i. Jenny Shinski: jshinski@ons.org

SWOG NURSING COMMITTEE

Executive Liaisons

Cancer Control Liaison

Purpose:

The Cancer Control Executive Liaison will facilitate communication between the Nursing Committee and the various Cancer Control Committees.

Objectives:

Provide at least one qualified Quality of Life (QOL) Coordinator to each protocol-containing patient reported outcome questionnaires.

Provide a mechanism to develop, support, and/or facilitate development of nurse-generated research activities within CCPC.

Responsibilities:

1. Establish required educational preparation for new nurse quality of life coordinators
2. Update the Nurse QOL Job description in collaboration with SWOG statistical office staff and operations office.
3. Maintain a roster of trained nurse QOL coordinators
4. Identify new nurse volunteers to serve as nurse QOL Coordinators
5. Collaborate with Nursing Committee members to assure SWOG Cancer Prevention and control representation as follows:
 - Cancer Prevention: 1 nurse member
 - Cancer Survivorship: 2 nurse members
 - Outcomes and Comparative Effectiveness: 2 nurse members
 - Symptom Control & QOL: 2 nurse members.
6. Other Responsibilities:
 - a. Represent the nursing committee in meetings, conference calls, and correspondence with the Cancer Control and Prevention Executive Committee (CCPC) and its respective full committees
 - b. In collaboration with the SWOG Disease Liaison subcommittee, provide consultation to members of the CCPC and other SWOG members in the areas of supportive care/symptom management, quality of life, patient education and clinical trial recruitment
 - c. In collaboration with the Disease Liaison subcommittee develop, support, and facilitate development of nurse-generated research activities with the CCPC
 - d. Identify nurse experts in the areas of behavioral science/quality of life, symptom management, pt education and clinical trial recruitment. Facilitate communication between these nurse experts and the CCPC
 - e. Serve as a liaison between the Nursing Committee, Disease Liaison subcommittee and the CCPC

- f. Provide a written summary of nursing activities within the CCPC to the Nursing Committee every six months
- g. Promote participation and accrual to SWOG cancer Control studies at the local level through one's institutional affiliation
- h. Review concepts and protocols generated through the CCPC and provide written comments to the appropriate subcommittee chair, study coordinator, and /or Operations Office as indicated
- i. Facilitate participation of Nursing Liaisons in the CCPC
- j. To work closely with the Symptom Control and Quality of Life Committee in order to initiate incorporate and activate cancer control research in supportive care, symptom management and quality of life
- k. To work closely with the Nursing subcommittees to develop, incorporate, and implement educational products and programs that relate to cancer control research and nursing

Cancer Control & Prevention Committees

1. Symptom Control and Quality of Life

a. Purpose:

- i. To represent and maintain a high profile in the Nursing committee and Symptom Control and Quality of Life Committee
- ii. To provide communication between the members of the Nursing Committee and Symptom Control and Quality of Life Committee
- iii. To provide communication between the Executive Nursing Committee and Symptom Control and Quality of Life Committee
- iv. To provide support and facilitate problem solving for the development and conduct of Symptom Control and Quality of Life Committee protocols
- v. To work closely with the Nursing subcommittees in order to initiate, incorporate, and activate Symptom Control and Quality of Life Committee research, interventions, and educational programs
- vi. To serve as a consultant for symptom management, quality of life, and other patient care issues to members of Symptom Control and Quality of Life Committee

2. Chemoprevention

a. Purpose:

The Chemoprevention Liaison will facilitate communication between the Nursing Committee and the Chemoprevention subcommittee of the Cancer Control Research Committee.

b. Responsibilities:

- i. To represent and maintain a high profile in the Nursing Committee and Chemoprevention subcommittee
- ii. To provide communication between the members of the Nursing Committee and Chemoprevention subcommittee
- iii. To provide communication between the Executive Nursing Committee and Chemoprevention subcommittee

- iv. To provide education to the SWOG membership regarding chemoprevention trials, specifically with regard to recruitment and retention issues
- v. To provide nursing expertise to the Chemoprevention subcommittee in the areas of symptom management, participant recruitment and retention, patient / participant education and study implementation

3. Molecular Epidemiology

a. Purpose:

The Molecular Epidemiology Liaison will facilitate communication between the Nursing Committee and the Molecular Epidemiology subcommittee of the Cancer Control and Prevention Committee.

b. Responsibilities:

- i. To represent and maintain a high profile in the Nursing Committee and the Molecular Epidemiology Subcommittee
- ii. To provide communication between the members of the Nursing Committee and Molecular Epidemiology subcommittee
- iii. To provide communication between the Executive Nursing Committee and Molecular Epidemiology subcommittee
- iv. To provide support and facilitate problem solving regarding accrual, specimen procurement and submission issues, and study implementation for Molecular Epidemiology protocols
- v. To work closely with the Nursing Subcommittees to support successful implementation of molecular epidemiology protocols and companion studies at the institutional level
- vi. To serve as a consultant for nursing and patient care issues to members of the Molecular Epidemiology subcommittee

4. Health Outcomes and Comparative Effectiveness Research

a. Purpose:

The Liaison to the Health Outcomes and Comparative Effectiveness Committee will facilitate communication between the Nursing Committee and Health Outcomes and Comparative Effectiveness Committee.

b. Responsibilities:

- i. To represent and maintain a high profile of the Nursing Committee on this committee
- ii. To facilitate communication between the Health Outcomes and Comparative Effectiveness Committee and the Nursing Committee
- iii. To facilitate the inclusion of research contributions in health disparities, outcomes and comparative effectiveness from the Nursing Committee members into research initiatives of the Health Outcomes and Comparative Effectiveness Committee
- iv. To provide support and facilitate problem solving for study development and implementation for Health Outcomes and Comparative Effectiveness Committee protocols

- v. To serve as a consultant for disparities in outcome, access to care, and other patient care issues to members of the Health Outcomes and Comparative Effectiveness Committee

5. Cancer Survivorship Committee

a. Purpose:

The liaison to the Cancer Survivorship Committee will facilitate communication between the Nursing Committee and the Cancer Survivorship Committee.

b. Responsibilities:

- i. To represent and maintain a high profile of the Nursing Committee on this committee
- ii. To facilitate communication between the Cancer Survivorship Committee and the Nursing Committee
- iii. To facilitate the inclusion of survivorship research contributions and educational materials from Nursing Committee membership into research initiatives of the Cancer Survivorship Committee
- iv. To provide support and facilitate problem solving for study development and implementation for Cancer Survivorship Committee protocols
- v. To serve as a consultant for survivorship issues, subject recruitment, feasibility and other patient care issues to members of the Cancer Survivorship Committee

CCOP Liaison

Purpose:

To provide a means of communication/networking among SWOG CCOP nurses and administrative staff an effort to problem solve and therefore produce continued quality patient care and data management.

Objective:

Goals of the CCOP liaisons efforts will be to improve/maintain CCOP RN job satisfaction and improve efficiencies of CCOP administrative Functions.

Responsibilities:

1. To provide communication between the Nursing Committee, CCOP nurses and CCOP administrative staff.
 2. To maintain a high profile in the Nursing committee as the CCOP Liaison
 3. To provide support and facilitate problem solving for CCOP nurses and CCOP administrative staff.
 4. To collaborate with the Nursing Disease Liaison subcommittee and Cancer Control and Prevention Committee as needed regarding logistics and feasibility of conducting such studies in the CCOP Setting.
-

Pharmacy Liaison

Purpose:

To serve as a nursing resource to the SWOG Pharmacy Committee for pharmaceutical issues including investigational drugs, drug interactions, safe administration and symptom management.

Objective: Assure that Drug Monographs are available and up to date for medications used in SWOG sponsored trials. Monographs will be finalized within 6 months of protocol initiation or updated information is received.

Responsibilities:

1. Collaborate with the education subcommittee to develop drug-related tools for patient and nurse education
 2. Provide communication between the members of the Nursing Committee and Pharmacy Committee
 3. Work closely with the Nursing Education Subcommittee to develop, update and maintain the drug narratives for the drugs manual
 4. Provide or facilitate inclusion of investigational drug updates during the Nurses workshop or breakout sessions
 5. Provide support and serve as a consultant for drug-related nursing and patient care issues
 6. Submit a six month update to the chair of the nursing committee at least one month prior to the bi-annual meeting
-

Quality Assurance Liaison

Purpose:

To provide a means of communication between the Quality Assurance Committee (QAC) and the Nurse Executive Committee in an effort to identify learning needs of nurse auditors, and sites related to quality assurance.

Objectives:

Assist in the development of at least one tool for SWOG nurses related to quality assurance.

Responsibilities:

1. Provide a communication mechanism between the Nursing Committee and the QAC
2. The Quality Assurance Liaison will attend the QAC meetings at the SWOG bi-annual meeting.
3. Assess quality assurance needs of Nursing Committee members
 - a. Collaborate with SWOG QAC to identify common problems found at time of audit.
 - b. Conduct literature search to identify best practices in Quality Assurance
 - c. In collaboration with the QAC, develop and implement Quality Assurance Tool/Education to address common problems

- d. Evaluate effectiveness of tool/education
- 4. Assess needs of SWOG nurse auditors
 - a. Conduct a needs assessment survey of SWOG Nurse Auditors
 - b. Collaborate with SWOG QAC, to identify/develop tools/education to address needs
 - c. Institute tools/education and evaluate effectiveness

APPENDICES

- A. Membership Application**
- B. Getting Through your First SWOG Meeting**
- C. Disease Liaison Forms**
- D. Fast Fact Sheet**
- E. Call for Abstracts/Posters**
- F. Executive Nursing Committee Six Month Report**
- G. Executive Committee Roster**
- H. SWOG Oncology Nursing Committee History**

Appendix A

**Southwest Oncology Group
Nursing Committee
Membership Application Form**

Date Submitted: _____

Date Received: _____

*Please note that it is highly recommended that you attend at least one out of every four meetings to become a member and maintain membership status. If you have questions regarding the application, please call **Patra K. Grevstad, RN, MN** at (206) 386-2442 or email her at Patra.grevstad@swedish.org*

Name & Credentials: _____

Current Position: _____

Specialty: _____

Business Address: _____

Telephone: _____

Fax: _____

E-Mail Address: _____

Principal Investigator: _____

Group Status: Member CCOP Affiliate UCOP Hi-Priority Other:

WOULD YOU BE INTERESTED IN HAVING A MENTOR? Yes No

If you are interested in becoming a member of a specific Subcommittee, please check the appropriate box(es) below; information will be sent to you.

Disease Liaison Committee QOL Coordinator Education Membership

Required Information – must accompany the application: CV (Resume or Biosketch)

I have reviewed the above application for membership in the Nursing Committee and recommend approval for the above applicant. My signature below affirms this recommendation plus my commitment to provide opportunities for attendance to SWOG meetings in order to maintain membership status.

Principal Investigator Signature

Date

PLEASE MAIL COMPLETED FORM AND REQUIRED INFORMATION TO:

Patra K. Grevstad, RN, MN
Membership Chair, SWOG Nursing Committee
Swedish Cancer Institute
1221 Madison, Suite #400
Seattle, WA 98104

Getting Through your First SWOG Meeting

PLEASE NOTE:

Please consult the annual schedule for specific dates and starting times. Below is the usual meeting, but the schedule is subject to change.

Pre - Meeting		OFFICIAL DAY 1 OF GROUP MEETING	
<p>The Clinical Trials Training Course is only offered in the spring.</p> <p>On occasion there may be pre- meeting activity. Please consult the meeting booklet or group meeting page on the SWOG website. http://www.swog.org/Visitors/GpMeeting.asp</p>		AM	<p>Nursing Committee Workshop</p>
			<p>CSP Scientific Session</p> <p>Exhibits</p> <p>CRA CE Workshop</p>
		PM	<p>Nursing Subcommittee Meetings</p> <ul style="list-style-type: none"> • Education • Disease liaison & QOL
			<p>CRA Plenary Session</p> <p>CRA Open Forum</p> <p>Exhibits</p>
OFFICIAL DAY 2 OF GROUP MEETING		OFFICIAL DAY 3 OF GROUP MEETING	
AM	<p>Disease Committee Meetings</p> <p>Working groups (closed sessions)</p>		<p>Board of Governor's Meeting</p> <p>Disease Site Committee Meetings - continues</p>
PM	<p>SWOG Plenary Session (All members attend)</p> <p>Disease Site Committee Meetings</p> <p>Working groups (closed sessions)</p> <p>Reception</p>	PM	<p>Disease Site Committee Meetings continue</p> <p>Meeting concludes in afternoon</p>
	Exhibits		

Disease Liaison Forms & Instructions

In Revision

Instructions for Making Fast Fact Sheets

1. Open Fast Fact Sheet Template:

Copy the number, title, drugs supplied, and treatment start (how many days from registration). Add how long treatment goes for, (e.g. 4 – 6 cycles, or till progression).

2. Review the eligibility criteria and fill in block-by-block, using clear, easy to understand language.
3. The table may be adjusted if there is more eligibility than non-eligibility or vice-versa. Try to keep the columns equal.
4. Do not leave blank rows; rows can be deleted by using the row delete option in the table menu. Rows may also be split or merged from the table menu.
5. Review the study calendar and eligibility to complete the pre-study requirements at the bottom of the page.
6. Everything must be kept on one page
7. Be concise, and keep it simple. It is the Fast Facts, not the last word, BUT it should still be reliable.
8. Creating the Fast Fact at the same time as protocol review, may assist in picking up discrepancies in the protocol.

See template on the next page.

SOUTHWEST ONCOLOGY GROUP
PROTOCOL FAST FACT SHEET

THIS FORM HAS BEEN DESIGNED AS A RESOURCE ONLY AND IS NOT INTENDED FOR USE IN THE FULFILLMENT OF PATIENT REGISTRATION AND TREATMENT REQUIREMENTS

S (number)

Complete title

Drugs provided: find under drug description

Treatment start: Find by registration info

Treatment : CONCISE description of treatment For (# of cycles or till progression)

Eligibility	Ineligibility
<i>Biopsy information</i>	<i>Pathology that would make them ineligible</i>
<i>Measurable and non measurable disease description</i>	<i>Usual info. . . No other prior malignancy except: treated basal cell or Squamous cell skin Ca, insitu cervical, stage I or II ca in CR; disease-free from any cancer for 5 years.</i>
	<i>Medical condition that might preclude safe treatment</i>
<i>Description of labs: for instance . . . Adequate hepatic fuction: bili < 1.5 X IULN, and SGOT or SFPT and Alk phos < 2.5 x IULN within 28 days prior to registration. (If hepatic mets are present SGOT/SGPT < 5 X IULN allowed, and if bone mets are present alk phos < 5 X IULN</i>	<i>Medications</i>
	<i>Not currently or planning on receiving any other non-protocol treatment</i>
<i>Other labs</i>	<i>Prior treatment with any similar drugs listed . . .</i>
<i>Zubrod P/S 0-2, 18 years or older</i>	<i>Pregnant or nursing women. Women/men of reproductive potential that do not agree to use effective contraception.</i>
<i>Prior Surgery or RT</i>	<i>For GMP: Pts should not have immediate life threatening complication of their malignancies. Except for cancer related abnormalities, pts should not have unstable or pre-existing major medical conditions or psych/social situations that prevent compliance.</i>

PRESTUDY REQUIREMENTS:

28 days before registration:

H&P, B/P, WT, PS, CBC, Diff, PLTS, labs, etc get from calendar.

42 days before registration:

Assessment of all non-measurable disease.

PRESTUDY SUGGESTED FOR GMP: any labs not otherwise strictly required, but suggested

*This form has been developed with the support of the SWOG Nursing Committee.

Call for Abstracts or Posters

Meeting Date: _____ **Fall** **Spring**

Name and Credentials: _____

Mailing Address: _____

Telephone: _____ **Work** **Home** **Cell**

Email: _____

Title: _____

Which breakout session would this presentation be most suited for:

Education/Quality Assurance Quality of Life / Disease Liaison subcommittee

Abstract: (May be instructional, clinical practice issues, or a research presentation)

Goal:

Objective:

Posters: There will not be boards provided, please bring pins or Velcro tape to attaché poster during session. Bring Handouts to distribute.

WILL YOUR INSTITUTION/AGNECY SEND YOU TO THE SWOG MEETING? Yes No

For Poster/Abstract presentations; submit within 4 months before meeting to:

Nancy Sprouse, RN, BSN, BS
Update Carolina CCOP
Spartanburg Regional Medical Center
101 E. Wood Street
Spartanburg, SC 29303-2072-2072
(864) 560-6812
(864) 560-6016 - FAX

**Executive Nursing Committee
Six-Month Report**

Member: _____ **Position:** _____

Date: _____ **Report Time:** _____ to _____

Were your goals met for this time period? Yes No

If No, please elucidate:

Accomplishments:

Accomplishment	Member	Credit earned for Committee?
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No
		<input type="checkbox"/> Yes <input type="checkbox"/> No

Problems:

Comments:

Mail, Email or FAX to:

**Rose Ermete RN, BSN, OCN, CCRP
Our Lady of Hope Cancer Center
14555 Levan, Suite 118
Livonia, MI 48154
(734) 655-8820 FAX
ermeter@trinity-health.org**

Executive Committee Roster

Name /Position	Address
Rose Ermete RN, BSN, OCN, CCRP Chair	Our Lady of Hope Cancer Center 14555 Levan, Suite 118 Livonia, MI 48154 (734) 655-2792 (734) 655-8820 – FAX ermeter@trinity-health.org
Nancy Sprouse RN, BSN, BS Vice Chair CCOP Liason	Upstate Carolina CCOP Spartanburg Regional Medical Center 101 E. Wood Street Spartanburg, SC 29303-2072-2072 (864) 560-6812 (864) 560-6016 – FAX nsprouse@srhs.com
Brubaker, Tanya RN, MBA Co-chair, Program	177 La Casa Via Suite 2 Walnut Creek, CA 94598 Office 925-941-4089 Cell 925-407-5632 Fax 925-941-2004 tanya.brubaker@johnmuirhealth.com
Coleman, Dorothy A. RN, MSN, CCRA (Co-Chair, Education)	Cancer Research Center of HI University of Hawaii 1236 Lauhala Street, Suite 402 Honolulu, HI 96813 (808) 586-2979 (808) 586-3016 - FAX dorothy@crch.hawaii.edu
Grevstad, Patra RN, MN (Chair, Membership)	Swedish Medical Center Tumor Institute 1221 Madison Street Seattle, WA 98104 (206) 386-2442 FAX: (206) 386-2310 Patra.grevstad@mail.swedish.org
Hansen, Lisa RN, MS, AOCN (Executive Liaison, Cancer Control) (Historian)	Good Samaritan Hospital 1015 NW 22nd Ave., M-200 Portland, OR 97210 (503) 413-6285 FAX: (503) 413-6920 Pager: (503) 299-5105 lhansen@lhs.org
Humphries, Keisha C. RN, BSN Quality Assurance Liaison	Wichita CCOP 929 N. Francis Wichita, KS 67214 (316) 268-5374 (316) 291-7855 FAX keisha.Humphries@viachristi.org

Mack, Karen RNP, BSN, OCN, CCRP Co-chair, Program	Winthrop P. Rockefeller Cancer Institute Univ. of Arkansas for Med. Sciences Little Rock, AR 72205 (501) 526-6990 ext. 8748 (501) 296-1274 FAX mackkarenl@uams.edu
---	--

Petrowsky, Cecilia RN, MSN, CCRC, OCN (Chair, Disease & Discipline)	Loyola University Medical Center Cardinal Bernardin Cancer Center 2160 S. First Avenue Bldg 112, Rm 113 Maywood, IL 60153 (708) 327-3306 (708) 427-3231 FAX cpetrow@lumc.edu
--	--

Sparks, Dana (Executive Liaison, Operations Office)	Director of Operations Southwest Oncology Group Operations Office 14980 Omicron Drive San Antonio, TX 78245-3217 (210) 450-8808 (210) 677-0006 – FAX dsparks@swog.org
---	--

History of the SWOG Nursing Committee

Advances over the last twenty years have dramatically changed the care of cancer patients. What was once primarily palliation, has now changed to aggressive treatment aimed at cure and necessitating complex, multi disciplinary care. Consistent with this complex care, nursing has changed and many new roles have evolved. Nursing, which traditionally focused on bedside care, now includes management of patients on sophisticated research protocols, screening and detection of cancer, patient education, hospital care, rehabilitation, collaborative and independent nursing research.

Evolution of the nurse oncologist's role within the Southwest Oncology Group has also changed from one of assistance and minor involvement to that of investigator, co-investigator and protocol reviewer. Historically, nursing activity began as far back as 1966 when the Group was called "The Southwest Cancer Chemotherapy Study Group." A nurse by the name of Norma Oberhauser from Henry Ford Hospital in Detroit participated with the Principal Investigator (P.I.) and attended group meetings.

Before 1979, nurses working with SWOG physicians and patients conducted annual educational programs, but there was no formal mechanism for their involvement in, or recognition as being part of the Group. One of those programs presented in 1978 at the November meeting in Las Vegas was entitled, "Effective Handling of Cancer Chemotherapeutic Drugs: Role of a Pharmacist/Nurse Clinician," and the presenter was Mary Ann Toll, an investigational drug pharmacist from the University of Kansas.

In 1979, nurses from both Adult and Pediatric SWOG institutions indicated an interest in becoming involved in additional educational and patient management activities. The initial nursing organization within SWOG was a subcommittee under the auspices of Cancer Control. The first nursing subcommittee was elected by nurses who were either involved with Cancer Control or SWOG or who had attended SWOG nursing workshops. The subcommittee members had their first meeting in March 1980 and included: Pediatric Representatives Pat Klopovich and Geri Wezel; and Adult Representatives Mary Ann Bord, Linda Pool, Pat Sato, and Ann Wilkinson. Alternate members were: Peds: Ann Pumphrey and Deborah Gaddy; Adult: Jeanne Mioduszewski, Lyn Cain, Marilyn Kline, and Norma Oberhauser. Geri Van Wezel was elected chairperson for the Nursing Subcommittee. Various topics were discussed at that first meeting which included the next nurse's workshop, a newsletter, a nurse's directory, and goals and objectives. The goals were:

- 1) Better define the role of the nurse oncologist.
- 2) Improve the care of patients being managed by protocol.
- 3) Collaborate nursing through nursing educational activities.
- 4) Establish a communication network by means of a directory and newsletter.

The first "Newsletter for Nurses" was published in the summer of 1980 by Mary Ann Bord, Lyn Cain, and Linda Pool. The second subcommittee meeting was held in September 1980 in Phoenix, Arizona. Unlike the nurse oncologist meetings of today, these were closed to all but the subcommittee members. Other nurses involved at this time were: Gayle Monroe, Jamie Moore, Kathy Finny, Christine Griffin, Anita Leonard, Jeanne Parzuchowski, Judy Shell, Sherry Taxer and Nancy Hughes. Some of the issues discussed at this meeting were:

- 1) Definition of the best use of nursing for patients who are being treated through Cancer Control.
- 2) What resources from Cancer Control could be expected to improve the nursing care.

- 3) What is it that nurses do for patients on treatment that could be done better through a group effort?

One other issue discussed at this meeting was the possible split of the Pediatric Oncology Group (POG) from SWOG. It was decided that Geri Van Wezel (Peds) and Linda Pool (Adult) would co-chair the subcommittee and Ann Wilkinson was named secretary. Pat Sato was appointed the chairperson for the Nurse's Workshop for March 1981.

Many important events occurred in the fall of 1980. The second newsletter was distributed along with a form to fill out for a new nurse's directory. The most exciting event, however, was that a NURSING protocol had been approved for distribution by the Operations Office. It was entitled, "A Descriptive Study of Chemotherapy Drug - Extravasation and Treatments Commonly Instituted Among SWOG." and the study coordinators were Lyn Cain and Mary Ann Bord. Although historical, it was never completed due to low patient accrual. Jeanne Mioduszewski also wrote a booklet entitled, "A Day in the Life of a SWOG Nurse," which was an information source for the patient to explain the role of the SWOG nurse and what she was all about. Due to a myriad of red tape, this source of information was not allowed to be published in the newsletter and unfortunately only a few nurses saw this amusing, yet informative patient booklet.

In March 1981, The Nurse's Workshop addressed basic issues such as the SWOG organization, clinical trials, protocol development and compliance, and drug selection. The POG was now meeting separately from SWOG, and two members of the adult alternate subcommittee were made full members of the subcommittee. It was recommended by the subcommittee to create an "open forum" at the September 1981 meeting for the rest of the nurses involved in SWOG to promote communication. Another momentous event for the Group was the election of Charles Coltman, M.D. as the new Chairperson of SWOG. Lawrence Baker, D.O. was appointed as Vice-Chairperson. Dr. Coltman has been one of SWOG nursing's biggest advocates since his election.

The nursing newsletter, although brief, continued and along with the Summer 1981 newsletter, came a SWOG nursing questionnaire to find out what activities we had accomplished. Since the nurse subcommittee was a component of Cancer Control, it was necessary to evaluate their activities for grant renewal to the National Cancer Institute.

The Fall 1981 SWOG Meeting was to be held in Kansas City, however, due to the tragedy at the Hyatt (a walkway ramp inside the lobby collapsed and killed many people), the meeting was held in San Antonio. Once again, history was being made. The nursing subcommittee, because of its status (subcommittee of committee) was hampered by uncertainty as to just how much autonomy it had in planning programs and activities for the larger group of nurses. This was further complicated by the inability of the Nursing Subcommittee to agree on a definition of a SWOG nurse vs. a Cancer Control nurse. Finally, since there was such a small number of nurses who actually participated in the subcommittee, a larger number of SWOG associated nurses began to support the formation of a standing nurse's committee. Things now began to happen at a more rapid pace. Many nurses were interested in conducting research and contributing to existing protocols rather than merely being assistants. In an effort to expand activities, enhance participation and better meet the needs of the Group, a proposal was presented to the Group chairperson (Dr. Coltman) supporting the formation of a standing nurse committee. After consideration by the chairperson, the proposal was presented to and approved by the Board of Governors in September 1981.

A "steering" committee of eight members was appointed by the Group Chairperson and subsequently met at the March 1981 meeting. The members were: Mary Ann Bord, Lyn Cain, Jeanne Mioduszewski, Judy Shell, Jeanne Parzuchowski, Sherry Taxer, Christine Griffith and Terri McDaniel, who became the new chairperson. Primary focus for the committee was in the areas of education and information exchange, nursing participation in cooperative clinical

research, and input into protocol design. Based upon these defined needs, subcommittees were formed to focus on each area. Formed at that time were subcommittees for education, communications, by-laws, research, and protocol liaison, each being chaired by a member of the steering committee. The method of further membership selection consisted of each Principal Investigator selecting one nurse from his/her staff to serve on the committee. In addition, the P.I. was requested to name the most active Cancer Control physician who would also be asked to appoint one nurse. This system of membership recruitment was designed to provide for equal representation between P.I.'s and Cancer Control to assure support for the nurse's committee activities. As you can see, membership remained cumbersome, at best.

The different committees had goals for their activities:

- 1) The goals set by the Education subcommittee focused on the development of educational tools and the institution of a library of audiovisual resources available to any institution within the Group. The annual nurse's workshop would be recorded and placed in the library for use by the nurses unable to attend the meeting.
- 2) By-laws for the committee were written and reviewed by the steering committee. Approval of the by-laws was done by mail. Elections were held at the Group meeting in March of 1983. As the duties of a by-laws subcommittee are somewhat limited after approval of the initial document, it was decided that they would develop and implement a quality assurance program.
- 3) A Membership subcommittee was added to the list of standing subcommittees after the initial members were appointed. Additional members were accepted into the committee by presenting letters of recommendation from a current member of the committee and the employing physician. This provision was made to allow for membership by interested, active persons from an institution already represented on the committee.
- 4) The Research and Protocol Liaison subcommittees began initial planning of research studies which could be incorporated into new treatment protocols. Nurses assigned to each Disease Committee would be responsible for reviewing all new studies to identify those into which additional research questions may be inserted. They also would have responsibility for reviewing all studies prior to activation with regard to need, priority, study design, and feasibility, as well as the nursing aspects of the protocol. They would participate in the semi-annual disease committee meetings and have input into committee decisions.
- 5) The Workshop Planning subcommittee was appointed on an annual basis to prepare and execute a nursing workshop to be held each March at the Group meeting. The workshop would contain both didactic and round table sessions to present new information and updates to Group nurses and provide an introduction for nurses new to the Southwest Oncology Group. 1983 addressed prevention and early detection of cancer with special attention to the aspects of safe handling of antineoplastic agents. An update of new agents was presented by a member of the Investigational Drug Branch of the NC.

In September of 1983, the nurse plenary session dealt with an overview of research methods presented by Patricia Stanfill from St. Jude. Presentations were also given by Penny Ekegren and Marilyn Davis. Poster sessions were presented on educational materials from various SWOG institutions. Mary Anne Bord was currently the chairperson and it was decided that at the end of her term in March of 1985 that the chairperson would then be appointed by the SWOG Chair, Dr. Coltman. Reports were given by Nancy Hughs, Chair of Protocol Liaison, and Jeanne Mioduszewski from By-laws. It was also decided that all Group nurses interested in participating in committee activities were to be considered members. Consequently, the

membership subcommittee was disbanded and all information was to be dispersed to all Group nurses (approximately 200).

The February 1984 meeting saw yet another committee (By-laws) dissolved in an effort to be consistent with other standing SWOG committees. The composition of the Executive Committee expanded to include the Chairperson, Vice-Chairperson, Secretary-Treasurer, Protocol Liaison Chairperson, past Chairperson and one representative from Cancer Control and CGOP. The other members were chairs from Education/Quality Control and Research. This committee began work in late 1984 on a proposal for a seat on the Board of Governors of the SWOG and submitted the proposal in January of 1985.

In March of 1985, Marilyn Davis was appointed Chairperson of the SWOG Nurse Oncologist Committee. We were ready for a site visit and Ms. Davis was prepared for this with a competitive grant application. Members of the Executive Committee were: Marilyn Davis, Chair; Judy Shell, Vice-Chair; Ann Wilkinson, Secretary; Jeanne Mioduszewski and Anita Leonard, Education/Quality Assurance Chairs; Jeanne Parzuchowski and Pat Tobin, Disease & Discipline Committee Coordinators; Kathy Hayden, Research Chair. The nurse membership was surveyed and revealed that 50-60% of respondents performed a dual role as nurse clinicians and data managers. Semi-annual scientific sessions continued to be targeted toward education, research, and the clinical needs of nurse clinicians, educators, researchers, and data managers. Occasionally, the data managers and the nurses combined their efforts into one educational program and in combined poster sessions. In 1985-86, new concepts and protocol drafts generated by nurses began to be highlighted. A scientific forum was created for presentation of research abstracts by nurse investigators. Accomplishments in 1985-86 included:

- 1) Development and circulation of administration guidelines for ara-c, interferon and leuprolide.
- 2) Development and circulation of three surveys.
- 3) Several concept sheets were generated for circulation.
- 4) The nurse plenary session provided presentations by Shirley Otto from Wichita, Barbara Medvec from the University of Michigan, and Ann Bavier from NC.

It became evident that once the SWOG nurse got started, there was no limit to the activities related to research that he/she was willing to participate in and able to accomplish.

In 1986-87, the SWOG nurse oncologist group continued to be productive. For the new nurse to SWOG, a nurse/data manager comprehensive job description was created by Jackie Fisher. Round table sessions at the Group meeting were done featuring introduction to the nurse oncologist committee and a written overview of options open to participation for all nurses within the structure was made available. A comprehensive written guide to review an existing or proposed protocol for clarity, cohesiveness, cost containment, and patient and clinician compliance was presented for circulation. All educational offerings began to offer continuing education units in response to the need expressed by 75% of nurse attendees. Programs offered in 1986 were presented by Pat Klopovich, Marilyn Davis, Jeanne Parzuchowski, Kathy Hayden, Geoffrey Weiss, and Deborah Welch-McCaffrey. Wherever the SWOG meeting was to be held, the local and regional oncology nurses were invited for networking and education.

In 1987-88, the nurse oncologist committee became formally recognized and three nurse oncologists became members of the Board of Governors (Chair, Marilyn Davis; Vice-Chair, Judy Shell; and Research Chair, Kathy Hayden). Susan Penny, Program Chair, continued to work hard with her committee on the Plenary sessions and provides such topics as: Legal Issues for Oncology Nurses; Patient/Nurse Perception Regarding Informed Consent; Quality of Life: Cancer Control Study; Nursing Presentations at Tumor Board; and, Managing Stress in Your Life, to name a few. Members of Ms. Penny's committee during 1987-88 included: Donna Berry-

Opersteny, Catherine Glennon, Kathy Hayden, Jennifer File-Guy, Jeanne Mioduszewski, Jeanne Parzuchowski, Pat Tobin, Judy Shell, Amy Antel, Julia Ballard, Meredith Dawson, Candy Siebert and Denice Sheehan. A SWOG nurse library was formally started by Betty Nestor and Shirley Emily and included videos, books, and tapes from SWOG presentations. SWOG nurses could request any of these educational materials and keep them for two weeks at a time. Pamela Rosse took on the task of submitting information to the SWOG newsletter concerning nurse activities, etc. In April of 1988, the SWOG celebrated its 30th anniversary. In an attempt to bring as many of the nurses as possible back for a reunion, Judy Shell and Jeanne Mioduszewski-McDonough wrote an invitation to as many nurses as they had addresses for. The meeting was in New Orleans and several nurses returned for the big party.

The year 1987 began with over 105 active nurse oncologist members of the Southwest Oncology Group. The Executive Committee had some changes in "chairs." Juanita Garrison and Denice Sheehan were the Education and Quality Assurance chairs, and Jeanne Parzuchowski and Pat Tobin were the Disease and Discipline Committee chairs. Anita Leonard was our CGOP representative, and Lenore Harris became our operations office representative. The Education Nursing Subcommittee developed four Ad Hoc Committees which were: Posters, Newsletter, Protocols, and Library. Barbara Zorn was the Ad Hoc coordinator for posters, Shirley Emily continued on as the librarian; Anita Leonard coordinated the protocols; and, Pamela Rosse was responsible for the newsletter. Nurse oncologists were involved in one or more of the standing committees: Education and Quality Assurance; Disease and Discipline; Research and Program Productivity continued with more protocols and concepts being written for both SWOG and Cancer Control. Networking with the Eastern Cooperative Oncology Group and, hopefully, participation in intergroup nursing research would begin. Interest in developing or joining a Special Interest Group (SIG) in the Oncology Nursing Society was also enthusiastically discussed. The plenary session in October 1989 in Dearborn was well attended. The topics presented to the nurses included: Investigational New Agents, Colony Stimulating Factors, and Mentorship in Nursing.

The library was started at the West Florida Cancer Institution by Betty Nestor, RN. She felt like there was a lot of information presented at the SWOG meetings that was very helpful in her nursing practice. The thought occurred to her to collect these items and mail them to others that were not able to attend the meetings. Since that time other items of interest have been added. Betty's dream was to have a very useful and practical resource for all nurses to enjoy. Since her death in late 1986, the West Florida Medical Center Clinic continued the responsibilities of the library under the leadership of Shirley Emily, RN, who helped it to grow into a comprehensive source of information. The help of everyone involved with SWOG activities have been greatly appreciated.

In 1992, due to the decrease in funding, the lack of storage space for expansion, and the change in Shirley Emily's work responsibilities, the Executive Committee decided to discontinue collection of educational materials and products.

Under the leadership of Jeanne Parzuchowski as Chair (1990-1998) and Juanita Garrison as vice-chair (1991-1997), the Nurse Oncologist Committee based the committee planning and goals by writing and using Strategic Plans of action. There was a plan for the NOC as well as plans for each subcommittee. The strategic plans have allowed the committee to chart future goals based upon achieved goals.

The leadership of the Nurse Oncologist Committee was changed to Marcia Grove-Conrad as Chair (1999-2003) and Lisa Hansen as vice-chair (1998-2004). During her 4 ½ year tenure as chair, Ms. Grove-Conrad fostered an expanded role for Nurse Oncologists in clinical trial development, review, and education. The number of trials with nurse coordinators expanded

dramatically. She successfully represented the Nurse Oncologist Committee at the Reverse Site Visit in Bethesda, procuring six years of funding and a score of "Excellent".

Carolyn Schmidt, RN, MS was appointed as the new chair of the Committee in October 2003. Ms. Schmidt served for one year and continued to support the role of nurse coordinators. NOC members Lisa Hansen, RN, MS, AOCN, Patra Grevstad, RN, MN, and Deb Ward RN, MSN, AOCN worked with Statistical Center psychology consultant, Carol Moinpour, Ph.D., to develop the role of the nurse quality of life (QOL) coordinator. The first Nurse QOL Training Session was offered at the Spring 2003 Group Meeting. Nurse QOL coordinators became part of the study coordinator team and provided essential assistance to institutions and the Statistical Center by helping to assure timely and accurate submission of quality of life data. Ms. Schmidt stepped down from the chair position in September 2004. The long time vice chair, Lisa Hansen, was appointed chair and CCOP liaison, Marge Good, RN, BSN, MPH, OCN assumed the vice chair position. In 2007, Ms. Hansen completed her term as chair, and Ms. Good was appointed to chair the Nurse Oncologist Committee, with Rose Ermete RN, BSN, OCN, CCRP to serve as vice chair. In 2008, Linda Davis stepped down as secretary, it was decided that this position would not be replaced. In 2009 Marge and Lisa successfully wrote the chapter for the Nursing Oncologist Committee, and procured continued funding. They have encouraged increased nursing contributions to committees throughout SWOG and provided nursing leadership in the Cancer Control Committee and Recruitment and Adherence Committee. In 2010, Marge completed her term as Chair, and Rose Ermete RN, BSN, OCN, CCRP was appointed to chair the committee. Nancy Sprouse, RN, BSN, BS assumed the position of Vice-Chair.

During 2007, SWOG administration considered a proposal to combine the CRA committee and the Nursing Oncologist Committee. After several discussions, this was not considered feasible. The CRA Committee and the Nursing Committee, continue as separate committees within SWOG, however, this evaluation process led to more collaboration between the two committees. In 2009, the name of the Nurse Oncologist Committee was changed by the administrative offices of SWOG to the Nursing Committee.

The Research Subcommittee has set as a continuing goal the establishment of nursing research and collaborative research within the cooperative group setting. This subcommittee was under the leadership of Maggie Clarkson, RN, MS and Shirley Raltz, RN. Historically, June Strickland, RN, Ph.D. was the principal investigator of the first randomized nursing study conducted in the SWOG CCOP network (1989-1993). The study was, "An investigation of the relationship between an integrated system educational approach and breast self examination (BSE) compliance." The study enrolled 2,451 participants from nine participating CCOP. The interview and demonstration scores were significantly higher for the treatment arms with the BSE class than for the medical doctor's instruction only arm, but the reinforcement effect was not significant for accuracy. Shirley Raltz, RN developed and provided two educational opportunities for nurses interested in protocol development. The courses were developed to provide nurses with the basics of developing a study (Research 101) and identifying a concept that could be submitted (Research 102). Shirley Raltz stepped down from the committee in 2005, Maggie Clarkson continued as chair until 2010. After careful review of nursing research within SWOG, and past accomplishments, it was felt that nursing research would best be accomplished through collaboration with Cancer Control Committee. Therefore, the research subcommittee was rolled under the disease & discipline committee, and no longer was a free standing subcommittee.

Dr. Donna Berry continued Cathy Hayden's work in the area of Quality of Life. The collaboration and on going scientific support by Dr. Carol Moinpour of the Statistical Center has been a continuous part of the success of this research. These studies have shown major secondary endpoints to the disease studies. Quality of Life studies are designed to compare the effects of treatment arms with respect to many dimensions of patient function. Dr. Berry and Ms. Hayden,

along with several other NC members, are authors on multiple SWOG QOL and health outcomes publications. In

Ms. Lisa Hansen conducted a pilot study evaluating an educational program as a way of increasing cervical and breast cancer prevention screening among Hispanic women. The "Promotora" program was successful and established a model for utilizing Hispanic cancer survivors to convey screening information to their communities. Ms. Hansen published her results in *Cancer Nursing* in 2005.

The Group had several disappointments when cancer control studies were not seen to completion. An ambitious smoking cessation trial was developed by Ellen Gritz, Ph.D and nurse researcher, Linda Sarna, RN, Ph.D. Despite several years of effort, the study was closed due to slow accrual. Ms. Lisa Hansen was the nurse coordinator for an oral mucositis study in head and neck cancer patients (S9908). Unfortunately, this study was closed when the pharmaceutical company withdrew support for the use of their agent. Working with the Committee on Special Populations, a study was activated entitled, "S0229, Pulmonary Rehabilitation in Lung Cancer Patients" (Anna Schwartz, RN, Ph.D.). Moreover, nurse quality of life coordinators have contributed to measurement of quality of life and symptom measurement on multiple trials genitourinary trials including S9916, S9346, S9917 (Donna Berry, RN, Ph.D), the elderly initiative trials, S0028, and S0029 (Dorothy Coleman, RN, MSN, CCRA), pancreatic trial S0205 (Nancy Vaught, RN), skeletal-related event trial S0308 (Patra Grevstad, RN, MN) and head and neck cancer trial S0427 (Peggy Carroll, RN).

The Education Subcommittee, under the leadership of Dorothy Coleman and Pam Williams, continued to educate the entire SWOG membership as well as nurse oncologists. They have done so with updated Nursing Manuals, posters at group meetings, and handouts concerning the Nursing Committee and subcommittees. This committee has developed a collaborative effort with the Pharmacy Committee. Together they have written monographs of the agents used in SWOG clinical trials and are producing these in a Drug Manual, which is available online. In 2007, a collaborative effort with the Quality Assurance office at SWOG was lunched by the Education Subcommittee to assist in the development of a SWOG audit manual. However, the Quality Assurance office at SWOG did not approve the manual. The continued Brest Self Exam educational program, taught at each meeting, continued to be popular with new SWOG associates. With the release of recommendations from the American Cancer Society, and lack of meeting space, the BSE workshop was discontinued in 2007. The education committee continues with projects to increase the education & participation of nurse auditors, as well as the continual update and development of drug monographs.

The Program Subcommittee has continued to offer educational programs, which address the most current research areas as well as patient functioning issues in oncology. Rose Ermete, RN, BSN, OCN, CCRP and Karen Mack, RNP, BSN, OCN, CCRP have led this subcommittee since 2002. Several of the most recent programs concerned, "Clinical Trials Management," "Gastrointestinal Malignancies and Treatment," "The Role of the Clinical Trials Nurse," and "Pharmaceogenomics & Tailored Treatment in the Southwest Oncology Group." This subcommittee works with the Pharmacy Committee to bring updated information to the group at each SWOG meeting. Each program offers CEUs for nurses and SoCRA credits for CRAs. Program co-chairs also obtain CEU's for eligible subcommittee meetings. In 2010, Rose Ermete stepped down from the program committee to serve as the Nursing Committee Chair. Tanya Brubaker, RN, MBA now serves as co-chair with Karen.

The Disease & Discipline Subcommittee, has been under the leadership of Deborah Ward & Karen Barnowski until 2009. They have continually assured that one or more nurse liaison(s) were assigned to each of the sixteen Disease & Research Committees. The liaisons work with the disease committee to review capsules and developing protocols with an emphasis upon

patient functioning issues, cost, and potential nursing research. New review forms were developed for this purpose to assure consistent review of each developing protocol. New projects of this committee have include the Fast Facts Sheets (FFS) developed by Rose Ermete. A "FFS" is a "summary" sheet of the protocol to assist the physician, nurse, or CRA in discussing the protocol with a potential subject. This tool is now a standard part of the protocol. Lisa Hansen conducted a survey in 2008, which demonstrated that many members of SWOG consider the FFS a useful tool. This subcommittee works closely with Dana Sparks of the Operation's Office to assure accurate and timely reviews of protocol proposals. Responsibilities now include, QOL coordinators, Liaisons to the Disease committees, and protocol reviews. Deborah Ward and Karen Barnowski stepped down in 2009. Marge Good, RN, MPH stepped in as chair, until August of 2010, at which time she accepted a position with the NCI.

The Membership Subcommittee lead by Patra Grevstad has maintained an active group of over one hundred nurses. There is a separate membership review for the NC to assure that the nurse's institution is aware of the nurse's involvement in the NC and will be supportive of additional work. A Nursing Booklet, describing the NC, is available on the SWOG website and at each SWOG meeting. The booklet describes the NC, its functions, activities, how to get through a SWOG meeting and terminology.

The NC has several Executive Liaisons to standing committees of specific groups within the SWOG membership. The Cancer Control and Prevention Committee liaisons include Executive Liaison (Lisa Hansen), Symptom Control and Quality of Life (Lisa Hansen), Chemoprevention (vacant) Cancer Survivorship (Lisa Hansen, Dorothy Coleman); Pharmacy Committee (Nancy Sprouse and Dorothy Coleman), and CCOP/Affiliates (Nancy Sprouse). The Executive Committee of the NC continues to work closely with the Operation's Office and Statistical Center, as well as the Clinical Research Associates Committee through liaisons or sharing of information at semiannual meetings. These communications and work on specific projects assure the advancement of the goals of SWOG and the Nursing Committee.