Nurse to Know: Linda Watson

What is your present role? (What do you do in that role?)

I am currently the Lead of Person Centred Care Integration within CancerControl Alberta. In this role, my areas of responsibility revolve around building capacity at point of care to deliver tailored, individualized care to cancer patients across their cancer journey. This has been achieved by designing, implementing and evaluating programs that aim to enhance the person-centred nature of care delivery. The provincial programs currently in my portfolio include cancer patient navigation, survivorship, screening for distress, and patient-reported outcomes.

What drew you into nursing? What influenced you to become a nurse?

I really wanted a job where I got to work with people and make a difference in their lives. I did not want a job where I was stuck in an office. I wanted a workplace that was engaging and full of action. When I was selecting my career path, I contemplated speech/language, physiotherapy, and nursing. I decided on nursing as it was the most portable and had lots of good job opportunities.

What drew you into oncology nursing? (What influenced you to become an oncology nurse?)

When I finished my undergraduate degree, I applied for med/surg nursing positions and took the job on a surgical ward of a general hospital, which happened to focus mostly on cancer surgeries. When I picked the job, I did not even realize the ward had a focus on oncology. But once I started working there, I was hooked. I realized that working in an oncology-focused surgical ward was both intellectually challenging, as there was so much to know, as well as relationally rewarding, because I got to know my patients and their families well. The opportunity to make a difference in the lives of my patients by being knowledgeable and supportive was very tangible.

How would you characterize or describe the driving forces for you regarding your practice as a nurse?

Cancer patients expect oncology nurses to be technically competent. That is the baseline expectation. What makes an oncology nurse memorable in the eyes of their patient is when they can artfully combine technical competency with authentic engagement and the provision of meaningful care and supports. That is what has always driven my practice, the desire to integrate both technical competency and relational care, as it relates to the individual and the situation in which I meet them as a nurse.

What do you find most exciting about being a nurse?

The most exciting part of being an oncology nurse is that every work day is different. You never have the same day twice, as you meet different people, have different challenges, find different solutions, and always go home having learned something new.

What have you seen as the biggest changes for nurses over the years of your career?

The biggest change for nurses that I have observed over my career is the growing complexity of our workplace. The protocols that we use to treat patients are more complex than ever before. For example, treatments that would have been delivered in an inpatient setting now are routinely delivered in ambulatory care. Also, technology such as EMRs, infusion pumps, and web-based patient education portals, which are integral to the functioning of our health care system, add an additional layer of complexity to our day-to-day work. Oncology nurses, now and in the future, require ongoing support to manage the complexity of our ever-changing work environment.

What do you see as the biggest challenges for oncology nurses/nurses today?

The biggest challenge that presents oncology nurses today is the fact that in order for oncology care to be sustainable, new models of cancer care delivery will need to be developed. Oncology nurses will be required to step up to new roles and responsibilities as our cancer care system explores new ways to provide high-quality cancer care within a financially sustainable paradigm.

What is your greatest hope for oncology nursing?

My greatest hope for oncology nursing is for oncology nurses themselves to recognize and embrace their capacity for contributing to health system transformation. This will require bravery, courage, and innovation on the part of oncology nurses, as going against the status quo is never an easy task. Health system transformation will require all of us to give up old ways of doing things and embrace new ways and new responsibilities. My hope is that oncology nurses will realize that we have a role in designing, implementing, and enacting that change.

What is the best advice you would give to an individual who is considering becoming a nurse/an oncology nurse?

When I started out as a young oncology nurse, people would often ask me how I handled being an oncology nurse, as it must be so depressing—and I am sure you will get asked the same question too—so, I will share my answer with you, as it may be helpful. “When you go into nursing, you know that you will be caring for people who have experienced tragic loss, and who are sick and suffering. And yes, cancer patients have all of those things, but I also went into nursing to make a difference in the lives of others, and every single day as an oncology nurse I know that I have made a difference in the lives of those for whom I care. I have never found oncology nursing depressing, rather every day I am enlivened by the bravery I see in the faces of those I care for and by the courage that they find to face what must be faced”.

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