The Uptake of Guidelines for Cancer Pain Management and Its Impact on Nursing Practice in South Korea: A Critical Ethnography

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STATEMENT OF ORIGINALITY

I hereby certify that the work embodied in the thesis is my own work, conducted under normal supervision. The thesis contains no material which had been accepted, or is being examined, for the award of any other degree or diploma in any university or other tertiary institution and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made. I give consent to the final version of my thesis being made available worldwide when deposited in the University's Digital Repository, subject to the provisions of the Copyright Act 1968 and any approved embargo.

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	Miran Kim			

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Abbreviations

The following abbreviations have been used throughout the thesis.

AACPMGWP Australian Adult Cancer Pain Management Guideline Working Panel

ACS American Cancer Society
AGC Advanced Gastric Cancer

AGREE Appraisal of Guideline for Research and Evaluation

AN(s) Assistant Nurse(s)
APS American Pain Society
CE Critical Ethnography

CANO Canadian Association of Nurses in Oncology

CCNS Cancer Care Nova Scotia

CIHR Canadian Institute of Health Research

CIT Critical Incident Technique

CPMG Cancer Pain Management Guideline DHUMC Daehan University Medical Centre

DON Director of Nursing
ED Emergency Department
EBG(s) Evidence-based guideline(s)
EBP Evidence-based practice
EMR Electronic Medical Record
ENR Electronic Nursing Record

FLACC Face-Legs-Activity-Cry-Consolability Scale

GS General Surgery

HIRAS Health Insurance Review and Accreditation Service

HIS Healthcare Improvement Scotland

IARC International Agency for Research on Cancer IASP International Associated for the Study of Pain

ICN International Council of Nurses
IRB Institutional Review Board
JCI Joint Commission International
KCSG Korean Cancer Study Group

KSHPC Korean Society for Hospice and Palliative Care

LCI Long-term Care Insurance

MA Medical Aid

MHW Ministry of Health and Welfare MMAT Mixed Methods Appraisal Tool

MO Medical officer MTX Methotrexate

NCC National Cancer Center

NCCI National Cancer Control Institute

NCCN National Comprehensive Cancer Network

NCI National Cancer Institute

NE Nurse Educator

NHI National Health Insurance

NHIC National Health Insurance Corporation
NHIS National Health Insurance Service

NIPS Newborn Infant Pain Scale
NP(s) Nurse Practitioner(s)

NPIs Non-pharmacological interventions

NRS Numeric Pain Rating Scale
NUM(s) Nurse Unit Manager(s)
NTGB Nursing Task Guidebook

O Objective data

OECD Organisation for Economic Co-operation and Development

ONS Oncology Nurses Society

P Plan

PAFS Pain Affect Faces Scale
PCA(s) Patient Controlled Analgesics

PCC Patient centred care

PCN Percutaneous Nephrolithotomy

Principle Investigator Ы

Pain Management Information Sheet **PMIS**

PRN Pro re nata

position, quality, relieving or aggravating factors, severity and timing **PQRST**

PS

Plastic Surgery
Research and Information Sharing Service **RISS**

Registered Nurse RN

Scottish Intercollegiate Guidelines Network SIGN

ST Superordinate theme

TRAM Transverse rectus abdominis myocutaneous

UN United Nation

WHO World Health Organisation

Key to transcripts

The following abbreviations and conventions have been used throughout the thesis, where excerpts from the participants' transcriptions have been used.

Names	Pseudonyms are used to refer to participants. The
	only true name within the data is the researcher's
Indented italic text	Indicates excerpts from the participants transcripts
	Indicates a pause contained in the original material
//	Material edited from the original for clarity
[square brackets]	Researcher's comments, added to provide clarity or
	explanation
Bold	Indicates a word, phrase, or sentence relevant to
	theme(s)
(Name and/or	Indicates the location of the excerpts
TL/TC/TM and/or	
A-VII-20)	

ABSTRACT

Given cancer causes pain and suffering impacting the quality of life of patients the use of evidence-based guidelines (EBGs) for pain management is essential for improving patient experiences. The Cancer Pain Management Guideline (CPMG) in South Korea was introduced in 2004 following many concerns of healthcare professionals, including nurses, about the suffering of patients with cancer due to pain. South Korean healthcare professionals believed that the introduction of the CPMG would influence the care and treatment of patients with cancer pain.

This study aims to critically explore the impact of the introduction of the CPMG on clinical practice of the nurses in cancer care facilities. Further, the study aimed to uncover the roles and functions of nurses and the factors that influenced or hindered the adoption/spread/uptake of the CPMG.

To answer the research question 'What is the impact of the introduction of the Cancer Pain Management Guidelines on nursing practice in South Korea healthcare context?' Critical Ethnography was deemed the most appropriate methodology, because it allowed the researcher to observe the practice, examine documents, explore reports on experiences and critically examine the emergent themes from the storylines provided by the 10 nurse participants working in acute cancer care units in South Korea.

A total of 13 themes were classified into three superordinate themes and some themes contained further subordinate themes, which included themes relating to the uptake of the CPMG, nurses' usual practices and the nurses' experiences of managing pain.

There was little evidence of the impact of the introduction of the CPMG on nursing practice. The findings also revealed that nurses' usual practice was observed as 'transactional' and not always demonstrating an advanced level of decision-making informing practice to serve the patients' true needs based on evidence. Nurses themselves were not evaluating their own practice and embracing a comprehensive set of roles and functions related to pain management. Nursing practice was influenced by various issues in terms of nurses' decision-making. These included: 1) the medically driven nature of the development processes for a set of guidelines suitable for use as EBGs; 2) an absence of evidence of the organisation's role in support of EBGs and subsequent support for quality care and a supportive work culture; 3) the valuing of the nursing contribution, and an apparent undermining of the nurses' role by all involved; and 4) lack of patient-family centred care aligned with the concept of a therapeutic partnership and mutual respect.

Recommendations include the need for an integrated approach at four levels: Policy informing the national guidelines; organisational support for implementation of EBGs; involvement of nurses in the EBP through the use of EBGs; and recognition of patients and families' involvement in education and decision-making about their care.