

## Telephone Counselling in Oncology: Experience of Resident Nurses

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**BACKGROUND:** Telephone Counselling is recognized as an activity of support for high levels of treatment adherence, patient security and quality assistance. The university extension program entitled "Acolhe-Onco: interdisciplinary integral care for cancer patients" embodies patient and family support and health promotion projects, bringing together professionals, teachers and students of different levels of professional degrees (college graduates, specialization, master and doctor). Since its beginning in 2008, the program has developed various activities, regarding as scenario the reality of assistance to cancer patients registered at Hospital São Paulo, from Federal University of São Paulo, in Brazil. One of the most important activities developed by Acolhe-Onco project is the telephone counselling, understood as an assistance support tool which aims for symptoms management and control, strengthened patient-professional bond and guidance through health services, in order to provide security and generate self-monitoring and self-management of the patient.

**HYPOTHESIS:** Knowing the benefits of telephone counselling for patient security and treatment adherence, this study aims to describe the actions developed in Acolhe-Onco's Telephone Counselling service managed by an Oncology Nursing Resident Program at University Hospital São Paulo, Brazil, as well as identify patients and their families/caregivers demands and satisfaction levels.

**METHODS:** Quantitative-qualitative, mixed nature case report. The Acolhe-Onco's Telephone Counselling service has a proper cellphone which is managed by the resident nurses of an Oncology Multiprofessional Residency Program at University Hospital São Paulo, Brazil. The hotline is provided to patients, families and caregivers in the outpatient appointment and stays online 24 hours/day. The hotline receives an average of 48 calls and makes an average of 32 calls monthly. To collect the data, this study classified the reasons of calls from July 2015 to January 2016 and applied a satisfaction questionnaire to 50 patients who agreed to participate.

**RESULTS:** The calls demands could be divided in two groups: Educational/Assistance and Administrative activities. The Educational/Assistance demands were related to doubts about how to proceed in the acute phase of signs and symptoms, medication administration, the need to seek emergency care services, emotional support during conflicting relations or hard time through the patient's end of life. The Administrative demands consisted of communication about missing an appointment or procedures, support for a new appointment scheduling and trouble in obtaining prescribed medications. The Telephone Counselling service was highlighted as a satisfaction reason of quality of care by all users. From the perspective of resident nurses who managed the service, telephone counselling is a viable activity to be implemented in the university hospitals which have residency programs and teachers involved in hospital activities. Telephone Counselling also develops educational function to professional qualification, as they are induced to give guidance and assistance to real demands, familiarizing them to oncology and Brazils' Sistema Único de Saúde (SUS).