



### RECaN, Phase 2

- Data from Estonia, UK, The Netherlands and Germany (2017)
- Clinical visits, focus group interviews, individual interviews, survey, meetings with stakeholders
- Hospital Survey on Patient Safety
  - 400 nurses
  - Questions on support, work content and workplace, leadership, communication, errors, safety



#### Results

- Devoted cancer nurses that love their jobs
- Important relationships with patients and their families
- Overloaded with work
- Differences in
  - Tasks and responsibilities
  - Education
  - Recognition
  - Professional status and autonomy
  - Career possibilities
  - Safety issues
  - Hierarchies
  - Teamwork and support



### Hospital Survey on Patient Safety

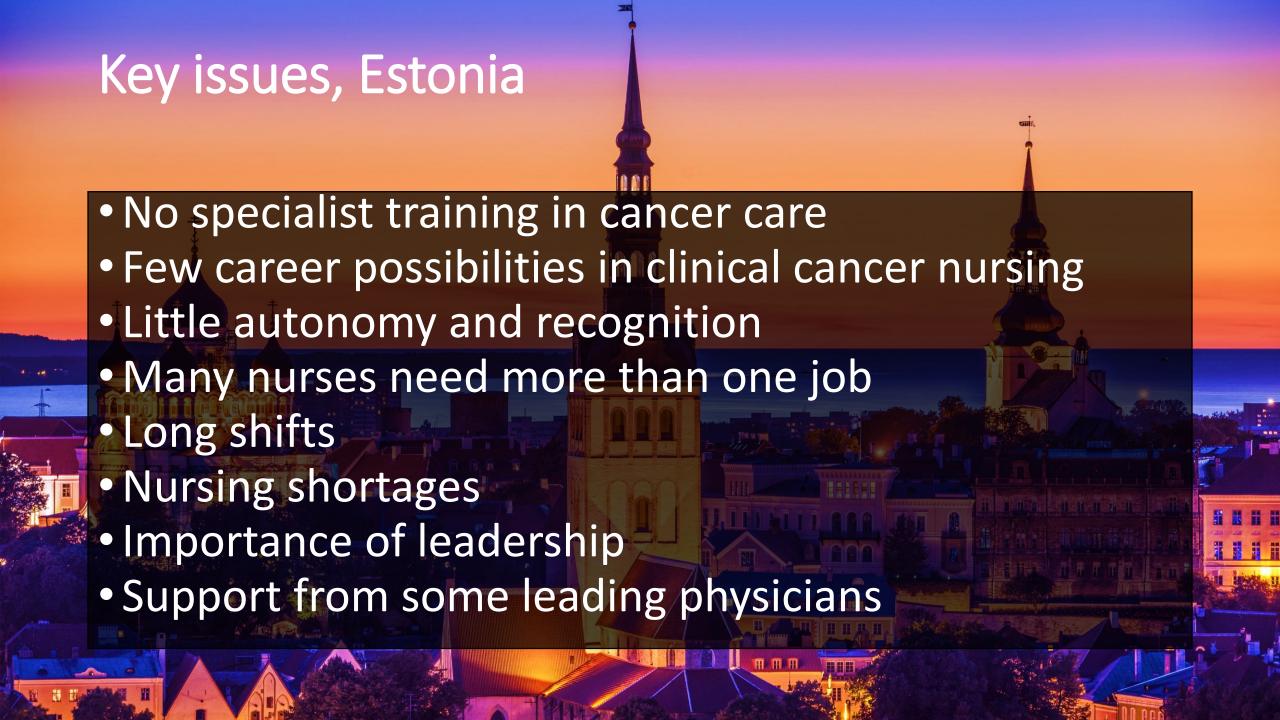
Proportion of positive responses	n (%)			
	UK	D	EST	NL
Overall grade on patient safety	68 (75)*	57 (36)	28 (44)	34 (49)



### Research is convincing...

- Review on nurse-led on ambulatory care
- 25 randomised trials, 180 000 participants
- 15/25 studies from Europe
- 14/15 from countries with well developed specialist nursing (NL, UK, Swe, DK)
- Conclusions
  - Nursing care is as effective or better compared with physician delivered care
  - Nursing care is more cost effective
  - Education and recognition is key!

Chan et at 2018, Int J Nurs Stud

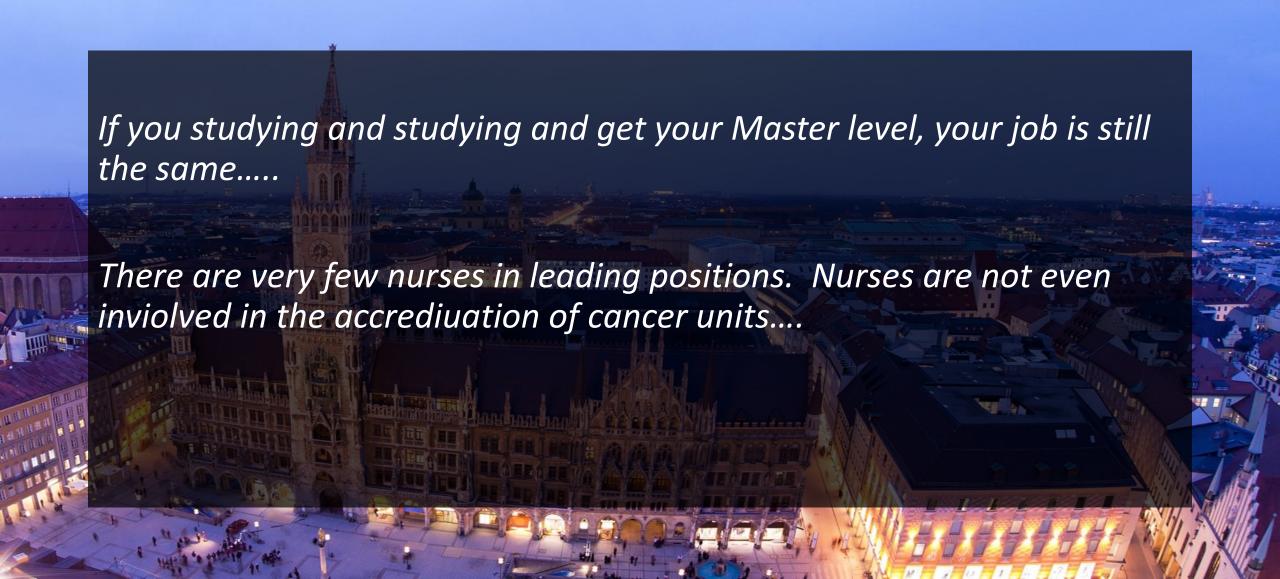




## Key issues, Germany

- Variation in training, most nurses without academic degree
- Report less autonomy = difficult to develop practice
- Nurse shortages
- Nurses competences are not used effectively
- 2 year education programme in cancer care (not academic)
  - 10 % of nurses in cancer care
- Lobby groups have opposed higher education for nurses
- Advanced nursing roles are being developed but on very few institutions and salaries that apply for other health care professionals with (Master degrees) do not apply
- Little response when nursing organisations try to impact political leaders

#### Words from German cancer nurses





- 2 -year cancer nursing programme based on national curriculum
- Nat. standards require that 50 % of nurses in cancer care should be qualified (by 2022)
- All cancer drugs should be delivered by qualified oncology nurses
- Good clinical career possibilities
- Advanced nursing roles well established and regulated
- Initial resistance overcome by successful lobby work
- Autonomy and recognition
- Strong support by patient organisations
- Less nursing shortage compared with the other countries



Now the nurse practioner is a profession...it is protected by law.

They are allowed to prescribe treatment and medication....they are allowed to carry out endoscopies, biopsies and minor surgical procedures and also symptom management, psychosocial support and that what other nurses do.

We really believe if you take good care of staff, then they will be more healthy and also more motivated and do their job better.



- Specialist training in cancer care
- Good clinical career possibilities
- Autonomy and high professional status
- Advanced cancer nursing roles well established
- Initial resistance
- Teamwork
- Severe nursing shortage, migration
- Importance of leadership
- Systematic work on safety

# Words from UK cancer nurses

What I like about my job is that I get to influence change. I work really closely with my team. They come to me with ideas, I support them to make changes

Estonian nurses are really happy to come over here because they can get better qualifications here

The advanced nurse practioners provide continuity of care because we change doctors every six month.... Patients come in acutely unwell and she can do everything from order X-rays and then check them, drain fluid from the chest and then discharge. She can prescibe as they need.

