

EONS Cancer Nursing Index 2020©

National profile: Serbia

Introduction

In the [RECaN project](#) EONS highlighted important differences in cancer nursing across Europe. The EONS Cancer Nursing Index 2020 (ECNI) was developed by the [EONS Advocacy Working Group](#) to illustrate the development and status of this profession in Europe. The index (with scores from 0-100) includes 22 items covering the following dimensions: Education and Career Development, Patient and Occupational Safety, Recognition, Working Conditions and Impact and Workforce statistics.

The Index is based on data from the following sources:

1. EONS Survey on Patient and Occupational Safety (anonymous survey, available in 9 languages) which at the time of this analysis, included over 650 responses from cancer nurses in 38 countries)
2. Interviews with leading cancer nursing experts. Nurses from 38 of 42 invited countries participated
3. Work force statistics (obtained from ec.europe.eu/Eurostat and OECD)

A scoring system was developed by the EONS Advocacy Working Group to reflect the level of development for the different Index dimensions/items. For items with a variety of responses from the same country, the most frequently reported response was used. The purpose of the Index is primarily not to rank some countries as better than others, moreover to illustrate cancer nursing profiles, differences and areas in need of development. The Index could be used to aid the development of cancer nursing in each country as well as for general European progress.

Dimension/item	Maximum score	Mean score (min-max)	Serbia	Comment
Overall score	100	48 (16 -78)	32	
Education and career development (5 items presented below)	23	9 (0-18)	1	
Specialist education on university level	5		0	
EONS Framework recognized/supported by Ministry of Education/Health	5		0	
Master programs in cancer nursing	4		0	
Advanced cancer nursing roles established	4		1	'Planned' To obtain the highest scores (4) for this item, advanced cancer nursing roles need to be fully implemented and recognized at a national level.
Professors in cancer nursing	4		0	
Patient and occupational safety (8 items presented below)	36	18 (3-36)	10	
Safety guidelines (cytotoxic drugs) available	5		2	'Some workplaces have' To obtain the highest scores (5) for this item guidelines should be in place at all workplaces.
Guidelines during pregnancy (cytotoxic drugs)	5		2	'Some workplaces have' To obtain the highest scores (5) for this item guidelines should be in place at all workplaces.
Pregnant and /or breastfeeding women assigned other tasks that don't involve direct contact with cytotoxic/radioactive drugs	5		2	'Sometimes' To obtain the highest scores (5) for this item pregnant/breast feeding women should be forbidden to perform task with risks for exposure to

				cytotoxic/radioactive drugs at all workplaces.
Systematic testing for occupational exposure (surface swipes)	3		0	Surface swipes were not reported by the Serbian nurses. To receive highest possible scores (3) for this item, testing should be systematically implemented at all workplaces.
Speak-up or whistle blower policy implemented for all members of staff	3		0	To obtain the highest score (3) for this item, all nurses should have reported that policies were in place.
Access to cytotoxic spillage kit and PPE	5		1	'Sometimes' To obtain the highest score (5) for this item, all responding nurses should have reported that PPE are always available.
Formal training before administering cytotoxic drugs	5		2	To obtain the highest score (5) for this item, formal education should be obligatory before managing cytotoxic drugs at all workplaces.
Nurses not preparing cytotoxic drugs	5		1	'It happens every month' To obtain the highest score (5) for this item, the responding nurses should have reported that it never happens.
Working conditions and the impact on cancer care (4 items presented below)	20	15 (3-19)	14	
Level of adherence to European Working Time Directive (EWTD)	5		2	'Rarely follow' To obtain the highest score (5) for this item the EWTD should be reported as always followed.
Risk of negative consequences if asking for alternative duties pregnancy/breast feeding	5		2	'Sometimes' To obtain the highest score (5) for this item all responding nurses should have reported that there is no risk for negative consequences.
To what extent hospital beds are closed due to cancer nursing shortages	5		5	
To what extent cancer treatment delayed due to cancer nursing	5		5	
Recognition (4 items presented below)	18	8 (0-15)	6	
Does the country have a cancer nursing society?	5		5	
Does the country have a national cancer plan that includes nursing care?	3		0	
Does cancer centers in the country have Board positions dedicated for cancer nursing?	5		1	'Some centers have' To obtain the highest score (5) for this item, the respondent nurses should have reported that this is always the case.
To what extent is nurse-led cancer care implemented in the country?	5		0	
Work force statistics (1 item)	3	1 (0-3)	1	
Number of practicing nurses/1000 citizens (www.europe.eu/Eurostat and OECD)	3		1	To obtain the highest score (3) Serbia should have >8 practicing nurses/1000 habitants.

Strengths and recommendations for improvements

The total score for Serbia (score 32) were under the total mean score (score 48) in the ECNI. Other countries with the similar total score were Armenia and Croatia (both with total score 29), Georgia (total score 30) and Albania (total score 35).

Patient and Occupational safety are major concerns as most of the items in this dimension received low scores. Most of the factors known to improve safety, such as education and speak-up policies, guaranteed access to personal protection equipment (PPE) were not confirmed by the Serbian nurses. Cancer nurses in Serbia also report that they prepare cytotoxic drugs regularly, in contrast to most other countries (where pharmacists perform these tasks). Some nurses report that they run the risk of negative consequences if they ask for different duties during pregnancy and breast-feeding. These conditions cause concern and jeopardizes both patient and occupational safety.

With regards to Education and Career Development, the results indicate that major efforts are needed to improve access to education at all levels. Consequently, advanced level nursing roles and nurse-led care are not implemented.

Serbia also has lower number of practicing nurses compared with most countries in the Index. Despite this, cancer nurses in Serbia report that hospital beds never close or that cancer treatments never are delayed due to nursing shortage.

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