

# EONS Cancer Nursing Index 2020©

National profile: United Kingdom

## 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)	UK	Comment
<b>Overall score</b>	<b>100</b>	<b>48 (16 -78)</b>	<b>71</b>	
<b>Education and career development (5 items presented below)</b>	<b>23</b>	<b>9 (0-18)</b>	<b>18</b>	
Specialist education at university level	5		5	
EONS Framework recognized/supported by Ministry of Education/Health	5		0	
Master programme in cancer nursing	4		4	
Advanced cancer nursing roles established	5		5	
Professors in cancer nursing	4		4	
<b>Patient and occupational safety (8 items presented below)</b>	<b>36</b>	<b>18 (3-36)</b>	<b>22</b>	
Safety guidelines (cytotoxic drugs) available	5		5	
Guidelines during pregnancy (cytotoxic drugs)	5		2	'Sometimes' 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 wipes)	3		0	To receive highest possible scores (3) for this item testing should be systematically implemented at all workplaces.
Speak-up or whistle blower policy available for all members of staff	3		3	

Access to a cytotoxic spillage kit and PPE	5		5	
Formal training before administering cytotoxic drugs	5		5	
Nurses not preparing cytotoxic drugs	5		0	'It happens every week' To obtain the highest score (5) for this item, the responding nurses should have reported that it never happens.
<b>Working conditions and the Impact on cancer care (4 items presented below)</b>	<b>20</b>	<b>15 (3-19)</b>	<b>17</b>	
Level of adherence to European Working Time Directive (EWTD)	5		4	'Most of the time' 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		5	
To what extent hospital beds are closed due to cancer nursing shortages	5		4	'It happens very rarely' To obtain the highest score (5) for this item, the responding nurses should have reported that it never happens.
To what extent cancer treatment delayed due to cancer nursing	5		4	'It happens very rarely' To obtain the highest score (5) for this item, the responding nurses should have reported that it never happens.
<b>Recognition (4 items presented below)</b>	<b>18</b>	<b>8 (0-15)</b>	<b>13</b>	
Does the country have a cancer nursing society?	5		5	
Does the country have a national cancer plan that includes nursing care?	3		3	
Does cancer centers in the country have Board positions dedicated to cancer nursing?	5		0	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		5	
<b>Work force statistics (1 item)</b>	<b>3</b>	<b>1 (0-3)</b>	<b>1</b>	
Number of practicing nurses/1000 citizens (www.europe.eu/Eurostat and OECD)	3		1	To obtain the highest score (3) the UK should have >8 practicing nurses/1000 habitants.

### Strengths and recommendations for improvements

Overall, the UK (total score 71) received high scores in the ECNI 2020. Congratulations! The UK had the same total score as Austria. Other countries with similar total scores were Finland (total score 70) and Germany (total score 72).

The UK were, together with Norway, The Netherlands and Ireland the countries with the highest scores for Education and Career Development. Here, The UK received maximum scores in four of the five categories. The UK was also one of only four countries in the Index where Advanced cancer nursing roles were fully implemented and recognized at a national level. If the Minister of Health would support EONS Cancer Nursing Education Framework, the UK would have completed this dimension with full scores. The UK was one of the few countries (together with Denmark and Sweden) where it was reported that nurse-led care was fully implemented.

In the Patient and Occupational safety dimension, some UK nurses reported that pregnant/breast feeding women were continuing to perform task with potential risks for exposure to cytotoxic/radioactive drugs and also that some workplaces were lacking guidelines for handling cytotoxic drugs during pregnancy/breast feeding. It was also reported that nurses are frequently involved with the preparation of cytotoxic drugs. In most other countries these tasks are performed by pharmacy staff. If guidelines and regulations were in place here, the scores would have been higher and also if systematic wipe testing for occupational exposure was performed.

Finally, if all cancer centers had a dedicated board nursing position and if the number of practicing nurses increased, the scores would also have been higher.

*EONS Advocacy Working Group, October 2020*