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Defining the scope of haematology nursing practice in Europe

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ABSTRACT

Keywords:
Haematology nursing
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Purpose: The changing role of haematology nurses has never been mapped systematically which makes it difficult to plan practice development initiatives in a strategic manner.

Method: A survey was conducted to gain insight into the role of European haematology nurses and identify their learning needs.

Results: Two hundred and seventy one questionnaires were completed by nurses from 25 countries, most of who were unit-based clinical nurses (116, 43%), had 10 years or more of experience in haematology (56%) and no specialist qualification (65%). The most common professional activities undertaken involved the detection and management of side effect. Respondents believe that they are well trained, possess good communication skills and play a key role within the multidisciplinary team. However, a small but significant number of nurses indicated that they had a limited role to play in patient education (42%) and only 38% (102) agreed that they played an important role in facilitating patient choice. Lack of time, limited course availability and staff shortages are perceived as key barriers to developing practice.

Conclusions: Nurses are most interested in receiving further education about graft versus host disease and late effects of treatment. The knowledge component of the questionnaire revealed numerous deficits. Demographic factors such as role and experience had a significant influence on responses.

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Introduction

It is estimated that there are over 4.5 million nurses and midwives in the WHO European Region, which makes them the largest group of health care providers in Europe. However, nurses are not a homogeneous group and there are wide variations in nursing roles and skill-mix not only across the European region, but also globally (Buchan and Calman, 2004; Simoens et al., 2005). Some of these variations stem from differing educational preparation, lack of access to specialist training and continuing professional education (CPE), differences in physician/nurse ratios, myriad service innovations, the need for cost containment and nurse shortages.

A limited amount of research has been conducted to date to explore different aspects of haematology nursing practice in Europe. The research subgroup of the European Group for Blood and Marrow Transplantation (EBMT) - Nurses Group (NG) surveyed nurses at different European transplantation centres to gain insight into oral care practices. They found that oral mucositis is routinely and frequently assessed, however there were inconsistencies in how it was managed (Stone et al., 2007). In a study to investigate whether an educational intervention could improve haematology nurses' knowledge and skills in oral care Potting et al. (2008) found significant differences in knowledge and skills levels between Dutch nurses that had received oral care education sessions and those that had received no education. Atkinson and Tawse (2007) undertook a qualitative study with a small number of experienced haematology nurses from the UK who had undertaken specialist education in haematology. They found that specialist training had had a beneficial impact on the nurses' levels of knowledge and confidence. The respondents indicated that experience alone was not enough for them to develop their practice to a level that enabled them to meet the complex needs of patients with haematological conditions. The latter two studies point to the importance of advanced education and continuing professional education

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(CPE) in helping haematology nurses become more effective practitioners.

The European Oncology Nursing Society (EONS) reported the results of a learning needs assessment (LNA) of European oncology–haematology nurses relating to haematological toxicities (Foubert et al., 2005). The LNA revealed numerous gaps in nurses' knowledge about haematological toxicities, which was perhaps not surprising since few nurses had undertaken CPE on this topic in recent years. Most of the nurses surveyed expressed an interest in learning more about the different toxicities and favoured short courses as a CPE format. Web-based interactive learning was the least favoured CPE format. The TITAN initiative was developed on the basis of these findings and since then over 3000 European nurses have participated in a TITAN course (EONS, 2007).

EONS has also undertaken a survey of breast cancer nursing practice across Europe which also revealed gaps in nurses' knowledge about breast cancer care (Wengström et al., 2006). Common breast cancer nursing roles included the provision of psychosocial support and patient education as well as side effect management. Most of the respondents indicated that they were well trained, possessed good communication skills and played a key role within the multidisciplinary team. However, a small but significant number stated that they did not have an important role to play in patient education and helping patients make decisions. Lack of time was found to be the biggest barrier to practice development. Both of the EONS surveys showed marked variation in responses from nurses in different countries.

As part of its strategic plan the EBMT-NG has the goal of promoting and developing specialist education and CPE in the field of blood and marrow transplantation (BMT) and haematology (EBMT, 2007). The Group also has the goal of promoting excellence in haematology nursing practice. The scope of haematology nursing practice in Europe and the learning needs of European haematology nurses have never been mapped systematically. Without these benchmarks it is difficult to plan practice development initiatives and educational programmes in a strategic manner. Therefore, the EBMT-NG, in partnership with Novartis Oncology, decided to conduct a survey with the aims of gaining insight into the role of haematology nurses in Europe and identifying their learning needs.

Methods

The survey questionnaire, which was developed with input from EBMT-NG members, consisted of 22 closed-ended questions on demographics (eight questions), haematology nurses' role (seven questions) and barriers to practice development (seven questions). In addition, nine multiple-choice questions (MCQs) were included to test respondents' knowledge about basic aspects of haematology nursing practice. The questionnaire contained only one openended question, which provided respondents with the opportunity to comment on their answers and make recommendations about potentially useful training initiatives. The questionnaire was translated into French, German, Italian, Spanish and Turkish and reviewed by bilingual expert nurses to make sure that the

translations were accurate and the questions clear and understandable. It took approximately 20 min to complete.

Harris Interactive, an independent research organisation, was commissioned to collect the survey data and analyze the results. An invitation to take part in the survey was sent to all EBMT-NG members and specialist transplant and haematology units in membership of the EBMT. In addition, EONS members were invited to take part in the survey and paper copies of the questionnaire were distributed at international and national conferences attended by haematology nurses. Respondents had the choice of completing an online questionnaire, downloading the questionnaire and returning it to Harris Interactive by e-mail or completing a hard copy of the questionnaire that was distributed at conferences. Respondents were assured that their responses would be treated confidentially and anonymity was guaranteed. Data collection took place during September–October 2007.

Data were analysed using descriptive statistics and results presented as a cross tabulation. Differences between variables were assessed with statistical significance accepted at a confidence level of 95% (p < .05).

Results

Two hundred and seventy one nurses from 25 countries chose to respond to the survey (see Table 1). One hundred and sixty seven (62%) respondents completed the survey online and 104 (38%) completed the paper version of the survey. Some of the questionnaires were answered by senior nurses on behalf of all nurses in their unit. A response rate could not be calculated because a convenience sample of self-selected participants was used. The number of respondents from the majority of countries was too small to compare and contrast haematological nursing practice between countries.

Therefore, it was decided to compare differences across European regions. Countries were allocated to the different European regions based on their geographical position. Differences in responses across nursing roles were also compared. It was not possible to compare responses between all nursing roles since the number of respondents from certain roles was too small to be included in the analysis.

A breakdown of the respondents' characteristics is provided in Table 2. There were differences in characteristics across nursing role. For example 67% (26) of the clinical nurse specialists had a specialist qualification in contrast to 21% (24) of unit-based clinical nurses and 38% (18) of nurse managers. Clinical nurse specialists were more likely to have been educated to a bachelor's (9, 23%) or master's level (10, 26%).

In terms of European regions nearly half of the respondents came from Western Europe. Most in patient nurses (62, 53%) were from Western Europe (25, 22% from Germany), clinical nurse specialists (21, 54%) were from Northern Europe (12, 31% from the UK) and nurse managers (25, 52%) from Western Europe (11, 23% from Germany). A small number of questionnaires were completed by nurses from outside of Europe (4%). However, the base size was

Table 1Breakdown of numbers of nurses who completed survey by region and country (271 nurses from 25 countries completed the survey).

Western Europe (120, 44%)	Northern Europe (53, 20%)	Southern Europe (47, 17%)	Eastern Europe (40, 15%)	Others (11, 4%)
Austria (27)	Denmark (4)	Greece (3)	Czech Republic (1)	Australia (4)
Belgium (8)	Finland (6)	Italy (34)	Hungary (4)	Canada (3)
France (4)	Iceland (6)	Portugal (2)	Poland (2)	Israel (2)
Germany (44)	Ireland (3)	Spain (8)	Turkey (32)	Saudi Arabia (2)
Netherlands (16)	Sweden (5)		Estonia (1)	
Switzerland (21)	United Kingdom (29)			

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