

THURSDAY 25 OCTOBER 2001

*Multidisciplinary approach***Special Lecture**

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Communication - the foundation in collaborationS. Wilkinson. *Royal Free & University College, Head of Caring Services, London, United Kingdom*

Collaboration is both an attitude and an interpersonal process that combines co-operation and a spirit of working together. Nurses in cancer care are part of a multidisciplinary team, consisting of individuals who have received different training but who are required to work together to achieve a mutual goal - good patient care. Such working together means collaboration, a word derived from the latin laborare, meaning "to labour with". A labour it has frequently been! The historic dissonance between disciplines and within the discipline of nursing itself has never served the profession well. All too often there has been opposition, power struggles and petty status competition. Collaboration is a means of ending such battles and enables health professionals to provide comprehensive, efficient, good quality care. Good collaboration recognises each member's presence, skills and unique talents and generates effective teamwork, less staff stress and increases patient satisfaction. One of the key elements of achieving collaboration is effective communication - good communication within disciplines, across disciplines and with patients. This paper will explore models of collaboration; appraise the strengths, weaknesses, opportunities and threats of collaboration; review the implications of team working in cancer care; identify the effects of poor communication and highlight methods of improving communication skills. Practical strategies for handling examples of difficult situation in the clinical area will be demonstrated.

Plenary Round Table

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The Nurse-Doctor CollaborationA. Costa. *Fondazione Salvatore Maugeri, Division of Breast Surgery, Pavia, Italy*

Collaboration among health professionals (and between doctors and nurses in particular) represents a winning force against cancer. Mutual recognition on the different roles is essential to give patients the best possible care. Only collaboration can guarantee that continuity of care which is vital for the patient: proper transfer of information, reciprocal listening, mutual support are mandatory to cover a 24 hour assistance to the sick person who needs gold standard treatments but also information and psychological support, evidence based medicine but also state of the art nursing, technologically advanced cures but also human warmth.

Doctors need to receive more education in communication and psychological support. They should also be trained to a closer interaction with nurses in the decision making process. On the other hand, the difference in salary and career opportunities is nowadays in Europe one of the main obstacle to a greater assumption of responsibility by the nurses and to the establishment of a stronger interaction with doctors. Special educational programmes to promote multiprofessionality are required.

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The power and challenge of collaboration: the contribution of psychologists to (psycho)oncologyR. Sanderma. *University of Groningen, Northern Centre for Healthcare Research, Groningen, The Netherlands*

Within the field of care for patients and care for professionals, psychologists can contribute in several ways, i.e. through: (1) delivering additional psychosocial care to patients, (2) training of healthcare professionals in communication skills and improving skills to detect distressed patients who could need additional psychosocial care, (3) providing care to cope with

workstress of healthcare professionals, and, (4) psychological research which increases - among others - our understanding of coping with cancer. When presenting, some ideas will be given how psychologists can contribute to the quality of healthcare by delivering their expertise, which will highlight the points indicated. It is felt that, apart from the traditional tasks of psychologist, i.e. treating patients and doing research, there is a challenge to collaborate with other professionals, in order to increase competence of healthcare professionals in several areas. This can be done by delivering training both in special workshops and 'on the job' and by giving support to handle the stress and thereby reduce burn-out. To maximise spin-off, it is important that psychologists do not take a by-stander position, but intensify their collaboration with both medical doctors and nurses. By and large, it will be argued that by collaborating with other healthcare professionals and by putting in specific expertise related to the areas identified, psychologists can have a highly valued input to the area of (psycho)oncology.

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Shake hands with the octopus: collaboration with the oncology nurseP.R. Olsen. *Aarhus University Hospital, Department of Oncology, Aarhus, Denmark*

The oncology nurse is a key-person in coordinating the care of the cancer patient. She is close to the patient and is often the only one among the professionals whose position makes it possible to follow the patients through the hospital system and to get a deeper impression of the patient and his experiences. This position and the education of the nurse gives her the challenge to arrange all things - great and small - for the benefit of the patient. She becomes "the glue" that makes it all stick.

To succeed in this role she is dependent on collaboration, both with the patient, the relatives and other professionals from the multidisciplinary staff.

This collaboration is crucial. It is the only way to develop cancer care and to carry-out qualified and reasonable care of the patient in the clinic. Collaboration is also essential because of the increasing complexity of

cancer treatments and the demands from patients who become more and more knowledgeable.

This presentation will focus on shared values and respect as necessary conditions in collaboration and how ethnocentrism has to be avoided.

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Patient

Abstract not received.

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Power and Challenges of Collaboration: Perspective from the Industry

L. Grant. AstraZeneca, Macclesfield, Cheshire, United Kingdom

From the pharmaceutical industry perspective there are enormous benefits in collaborating with cancer patient and professional organisations. The pharmaceutical industry shares many goals with such organisations and collaboration can result in more effective and speedy outcomes. Common

goals include achieving an environment which is optimal for cancer care. Such an environment will facilitate the safe and effective delivery of cancer drugs. The pharmaceutical industry also shares the goal that patients are educated and empowered. Patients can then work with the industry and cancer professionals to design clinical trials and to help recruit patients into these trials. Finally, collaboration amongst the industry, patient and professional groups can help speed up the approval of novel cancer drugs, a significant issue in Europe today.

The key challenge for the industry is that despite our willingness to collaborate, our motives are often viewed with suspicion and many organisations fear that involvement with us can compromise credibility.

One way forward is that when the industry wants to partner with a professional/patient organisation on a project, and visa versa, clear principles should guide the relationship. It should be acknowledged that everyone has a right to benefit from the partnership and the contribution of each member should be valued and used appropriately - a truly symbiotic relationship. The pharmaceutical industry should never seek to compromise a patient/professional organisation's credibility, since credibility is the key to the achievement of mutual goals. A good example of these principles in action is AstraZeneca's recent partnership with EONS on the Nursing in Colorectal Cancer Initiative (NICCI). This project demonstrated the power of collaboration and also how the challenges can be overcome.

Poster Sessions

Integrating research, clinical practice and education

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POSTER

Improving quality of care for patients with advanced cancer through a knowledge exchange program

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Cancer nursing in Sweden, as in other countries, is fraught with many problems. Societal changes lead to frequent re-organisation of health care, increasing work loads with 'sicker' patients both in hospital and in home environments and increasingly limited economic resources for health care. In addition, the continually increasing and changing nature of the knowledge needed for expert care provision of patients with advanced cancer challenges nurses to continually update their competencies. At present, there is a lack of contact between cancer nursing practice, education and research. These are all issues which demand proactive and dynamic changes in the way nurses conceive their mandates and practice.

The aim of the project described in this poster is therefore to foster improved quality of care for patients with advanced cancer through collaborative endeavours integrating cancer nursing clinical practice, research and education, by means of a knowledge exchange program.

In this multicenter project, focus group discussions have been held with staff at three facilities for cancer patients with palliative care needs - one acute care ward for lung cancer patients, and two palliative care facilities including advanced home care, located in two different Swedish cities. The staff discussions related to issues requiring more knowledge resulted in a bank of research questions for literature reviews, which are forwarded to baccalaureate nursing students to carry out within the framework of their nursing education. The results of the literature studies are then presented in form of an academic paper meeting educational requirements, as well as presented back to the participating units in clinically relevant form, determined in collaboration with the participating clinical staff.

The project is thus expected to have clinical implications in terms of increased accessibility to existing knowledge of different types, which can be used by nurses working with cancer patients and families to improve care. Nursing students play an intermediate role, which hopefully can facilitate

integration of theoretical and experiential knowledge. Another expected outcome is generation of clinically relevant issues for further nursing research. Finally, this project provides a forum for sharing reflection about cancer nursing practice among clinicians, students and nursing teachers.

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POSTER

The long and short of it: A comparison of two approaches to teaching communication skills

S.M. Wilkinson¹, C. Leliopoulou¹, M. Gambles¹, A. Roberts². ¹Marie Curie Palliative Care Research & Development Unit, Royal Free & UCL Medical School, London, UK; ²Marie Curie Centre Liverpool, Liverpool, UK

Introduction: Communication between healthcare professionals and patients is a major cause of complaint. The positive outcomes of communication skills training integrated into part time cancer/palliative care courses have been established (Wilkinson et al 1999). It is unclear whether similar benefits can be demonstrated with a condensed training course. Aim: To compare the outcomes of two different communication skills training approaches. Methods: Contact time, teaching and evaluation methods were standardised. Each course comprised of 26 hours of contact time. The long course was separated into three days over a six month period, participants returned to clinical practice in between. The short course comprised of three consecutive days. Both courses included additional time for individual feedback on audio-taped assessments. Each group set their agenda, teaching methods included role play, discussion and demonstration videos. Pre-course, all participants completed a demographic questionnaire and an audio-tape recording of a patient assessment. Post course, each participant submitted a second tape recording of a patient assessment, together with a self critique. Both tapes were rated using The Communication Skills Rating Scale (Wilkinson 1991). Results: 300 nurses completed the long training and 96 the condensed short course. There were no significant differences in demographic data between the two samples. Nurses on the longer course demonstrated statistically significant improvements in every area of the assessment ($p=0.01$). Preliminary analysis indicates that the nurses on the short courses also improved on every area of assessment. More detailed analysis between the two samples is currently underway and will be presented.