

## **Joint Interactive Symposium ISNCC/EONS**

1159

### **The charity approach experience**

*G. Oliver. Macmillan cancer relief, London, United Kingdom*

The United Kingdom has benefitted from over 50 years of a National Health Service which for everyone is free at the point of delivery. Across the UK there are now over 600 cancer related voluntary organisations that are charitably funded. Macmillan Cancer Relief is one of the largest cancer care charities and since 1911 has worked to provide help and support to people affected by cancer. For some years cancer has been a top agenda item for the professionals, for the public and for politics. There have been unprecedented opportunities for partnerships to be developed across many interfaces but in particular, between the statutory sector (NHS) and voluntary/charitable organisations.

Macmillan is committed to the improvement and development of services for people affected by cancer. Through developing a wide range of services and posts Macmillan has been able to make a real difference. Examples include the Gold Standards Framework, which is a toolkit designed to help and support people who are reaching the end of their lives and who wish to remain at home rather than be admitted to hospital or a hospice. The importance of listening to cancer patients and ensuring their voices are heard cannot be underestimated and Macmillan is working in partnership with the NHS to establish facilitated groups across England which will provide training and support for cancer patients to take their place on planning, policy and strategy groups where cancer services are discussed and where plans are developed.

The charity approach to continuity of cancer care in UK is built on a foundation of independence. Cancer charities have freedom to be innovative, to seek partners across previously difficult interfaces – for example the private sector, industry and public sector organisations, and to utilise their significant experience and expertise in the shaping of national policy. Cancer charities may work alone or in federations or alliances. There are examples across the UK of significant improvements in policy, in NHS structures, in cancer treatment and cancer care where the charity approach has ensured the voice of the cancer patient is heard and services really do meet identified needs.

Cancer charities have had a vital role in maintaining the momentum of change within cancer services. As their body of knowledge expands and increases with the generous support of many hundreds and thousands of donors, so will their capacity to develop and deliver services and to influence the agendas across the country.

1160

### **A practical example of a multidisciplinary approach in continuity of care**

*H. Vorlickova. Masaryk Memorial Cancer Institute, Assistant Dept. of Management, Brno, Czech Republic*

It is remarkable how many changes have taken place. At the beginning of 1989 only few people were able to anticipate the quick collapse of the former regimes in Central and Eastern Europe. Pulling down of the Berlin wall with all its symbolism is closely related, both politically and economically, with our heading to European Union.

Masaryk Memorial Cancer Institute has become a unique specialized oncologic centre in the Czech Republic. It is practically the only setting in our country where it is possible to provide the cancer patients with comprehensive care at one place, where the diagnostic, treatment and nursing activities are efficiently linked with scientific research work.

Its history extends back to late 1920s, when surgeon Dr Jaroslav Bakes with his mother Lucie Bakesová, who was a social worker, founded a society called "The House of Consolation". The aim of this organization was to improve care of patients suffering with malignant tumours, and at the same time to enable a research work in this area of medicine. Thanks to the support by the first Czech president Tomáš Garrigue Masaryk and other renowned personalities everything could be realized at the beginning of 1935. During the time the name of the Institute changed, nevertheless,

its mission endowed by Dr Bakes remained unchanged: versatile care of cancer patients. At present, Masaryk Memorial Cancer Institute has the necessary hinterland for prevention, epidemiology, diagnostics, individual therapeutic modalities, nursing process utilization, physiotherapy and occupational therapy, follow-up with efficient interconnection with clinical and basic research, as well as for educational activities and health education.

**Preventive oncologic programme:** Prevention is the most readily available means of health protection, namely both primary, secondary and tertiary prevention, where the nurses play an important role. Good state of health means good working capacity, well-being and healthy self-confidence. Therefore ever increasing number of people realize that their health is not a matter of fact but a result of continuing personal effort. The offer of preventive programmes is of highest importance. At present, people are much better informed about cancer thanks to magazines, television, books and other resources. They start to realize that it is not the state that is accountable for their health (through the role of a physician) but they themselves through their life style and attitude to their lives.

The Czech Republic belongs among those few countries where already for several decades full-area registration of all cancers has been implemented using the so called reporting of the malignant neoplasms. The data are analyzed in the National Oncologic Register. Every year, there are tables illustrating the gross incidence, mortality, trends, age and space distribution of oncologic diseases available. This information is published by the Institute of Health Care Information and Statistics of CR. The preventive oncologic programme is based on the data of the National Oncologic Register and determines the proportion of the individual age categories of population in the total number of oncologic diseases. It determines the potential risk of the occurrence of cancers of the individual organ localizations. The survey of risks of the occurrence of the individual types of cancer in dependence on gender and age has been prepared. The Internet site dealing with cancer prevention has been put into operation.

At the Masaryk Memorial Cancer Institute all medical specializations necessary for provision of comprehensive health care of cancer patients are concentrated at one place. The Institute has 205 beds available for diagnostic and therapeutic care delivery.

Comprehensive oncologic care has been provided based on the principle of multidisciplinary approach, using a broad range of specialized services.

Nursing care has been covering a large area which has a direct influence upon the patients. The oncologic nurse has been a member of the treatment team, an equal partner having her unique mission – to care for the person as a whole, for all his/her biological, psychological and spiritual needs. The main aim is to improve the quality of nursing care so that it might respect the needs of the patients and increase their satisfaction. At all the wards, we have introduced the nursing process as a working method: from the point of view of a patient the need is understood as a demand, not as a drawback.

The implementation of the nursing process is based on active contact of the nurse with the patient. It is necessary for the patient and his/her family to trust the nurse. The nurse actively speaks in support of the patient's interests and cares for him/her with maximum regard to his/her dignity and need for privacy. The documentation system for chronological recording of the course of care delivery was introduced.

What does the nursing process offer to the patient and the nurse?

The benefits for patients/clients: continuity of care – written care plan is offered as a guide for 24 hours; coordinated care and unified attitude inspire confidence of the patient/client; prevention of errors and omissions assures satisfaction and trust in teamwork; individualized care – the care plan has been prepared based on the patient's needs, with regard to specific needs of the patient's personality as a whole; improvement of patient participation – the patient provides information about his/herself and is involved in the plan of care and discharge, which often ensures shorter hospital stay and higher patient satisfaction.

The benefits for nurses: job satisfaction – a good plan is creative, helps to use the time more efficiently and to shorten hesitation what to do next, lowers frustration and energy output; supporting knowledge development – the nurse realizes that her information resources stimulate her further desire for information and knowledge; strengthening the self-confidence – the prepared plan shows the goal, guides the nurse and thus supports the feeling of confidence and belief in the work done.