• The outcome, to assess the changes in clinical practice. A questionnaire, based on a case study, is sent out 3 months after the training. Focus groups are used to explore themes from the questionnaire.

Results: • 170 nurses completed the training in year one

- · Level of palliative care knowledge increased
- Collaboration improved
- Examples of change in practice

**Conclusion:** This project is an example of multi agency collaboration. The evaluations have shown that the awareness and knowledge of palliative care issues, necessary to improve patients' care, have increased.

1184 ORAL

## Comparison between nurse-led check-ups on demand and follow-ups by a physician after breast cancer surgery

I. Koinberg<sup>1</sup>, B. Fridlund<sup>2</sup>, G.-B. Engholm<sup>3</sup>, L. Holmberg<sup>4</sup>. <sup>1</sup> University, Medicin and Care, Linköping, Sweden; <sup>2</sup> University, Nursing, Lund, Sweden; <sup>3</sup> University Hospital, Oncology, Orebro, Sweden; <sup>4</sup> University, Surgical Sciences, Uppsala, Sweden

Abstract Aim: To compare effects of nurse-led check-up visits on demand and routine follow-up by a physician after breast cancer operation regarding patients' well-being, satisfaction, access to medical care and medical safety, measured as time to loco regional recurrence, distant recurrence and death.

Background: The value of routine follow-up with frequent visits to a breast cancer specialist both in terms of recurrence detection and patient satisfaction - has been questioned.

Subjects and methods: Two hundred and sixty-four consecutively selected women with newly diagnosed breast cancer, classified as UICC stage I or stage II, were randomised to follow-up at two hospitals in Sweden, either by routine medical follow-up, the physician group (PG n=131), or on demand by a specialist nurse, the nurse group (NG n=133). Measures were done at baseline and twice a year over a period of five years by means of a questionnaire based on the Hospitality and Depression Scale (HAD) and Satisfaction and Accessibility (SaaC) scales. Number of contacts with the health care services, number of diagnostic procedures, and time to recurrence or death were monitored.

**Result:** The analysis of HAD and SaaC did not show any statistically significant differences between the groups. The levels of anxiety and depression were generally low and levels of patient satisfaction high. There were no differences between the groups concerning time to recurrence or death

**Conclusion:** This study indicates that women with breast cancer in stages I to II can be followed up by a specialist nurse with high patient satisfaction and good medical safety.

1185 ORAL

## A cross-organisational clinical rotation programme for nurses in cancer and palliative care; a pilot project evaluation.

E. Ream, <u>A. Menon</u>, M. Johnson, A. Richardson. *King's College London, Florence Nightingale School of Nursing & Midwifery, London, United Kingdom* 

Background: A challenge for education providers is to meet the demand for a competent cancer and palliative care nursing workforce, able to deliver skilled care for patients at all stages of the cancer journey. A rotation programme combining placements in a variety of clinical situations, backed up with an education component through a Higher Education Institution is one possible solution. This addresses the problem of helping junior nursing staff, new to cancer nursing, enhance their knowledge and skills and facilitate their development. This paper will describe such a programme and its development over time and outline outcomes for the participants. The perceived benefits to participants will be discussed and evaluation data presented which highlight challenges.

**Methods:** A pilot rotation was established in South East London as a collaborative scheme between designated cancer centres, cancer units, palliative care providers from the voluntary sector and primary care. Twelve nurses have undertaken a rotation supported by two lecturer practitioners. This comprised:

- 3 or 6 month placements in community nursing, acute oncology, bone marrow transplantation, day-units, surgical wards and hospices.
  - Working towards achievement of specified clinical competencies
  - Access to a range of support
- Registration on degree or diploma modules in cancer or palliative care nursing.

Evaluation of this pilot programme comprised focus groups with participants at the end of each placement, as well as investigator-designed questionnaires.

Outcomes: Participants have expressed both challenges, such as travelling, costs and workloads, as well as benefits relating to greater breadth of knowledge, skills and overall confidence. They have also gained confidence and skill in areas identified as personal objectives at the beginning of the course. Many have gained promotion during or after the rotation.

**Conclusions:** Collaboration across organisations to provide training is as yet uncommon in nursing in the UK. The potential benefits of working in this way are great, but there are also practical difficulties to be overcome. Establishing structures that operate across organisational boundaries and giving the rotation greater structure will be essential to the ongoing success of this a scheme.

## Workshop

1186

## Counselling new colleagues to handle the reality shock

T. Borg. Norwegian Radium Hospital Montebello, Oslo, Norway

Learning objectives: To identify the problem of "the reality shock" and learn how counselling can contribute to solving the problem, to address methods and counselling issues.

Workshop leader and speaker: Tore Borg, Oncology nurse, Department of Radiation Therapy: The Norwegian Radium Hospital, Oslo

Speaker: Randi Lehne, Staff Nurse, Oncology Nurse, Departement of Medical Therapy, The Norwegian Radium Hospital, Oslo

The workshop will consist of a plenary session with two introductory speakers.

There will be one lecture on counselling regarding "the reality shock" where we will discuss the definitions of these topics.

- "The reality shock" as a reaction pattern that exists among newly graduated nurses.

Their dilemma being to carry out what they have learned in theory and putting it into practice.

 Counselling as a method for reflection to achieve improved and new alternatives for nursing practice.

Examples will be taken from a counselling group at The Norwegian Radium Hospital, Oslo.

The second lecture will present "reflection groups" as a counselling method to raise the ethical awareness among newly- graduated nurses.

Discussion around these topics will take place after the lectures in the plenary sessions.