

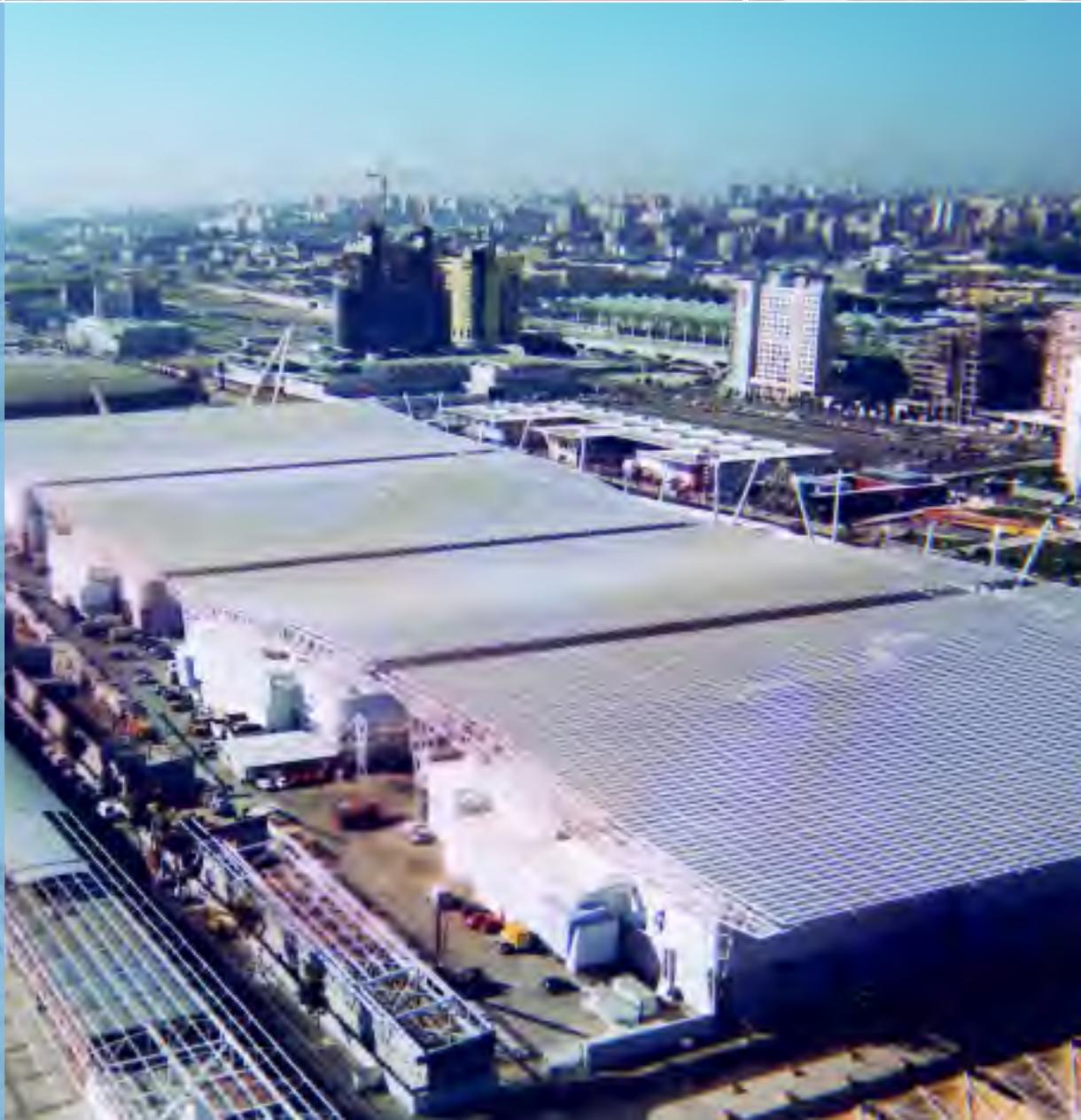


EONS

eons newsletter

The Quarterly Newsletter of European Oncology Nursing Society

March 2002



Contains:

**Our colleagues
from...**

**Collaboration with
cancer patients**

**Society News
update**

**Report from Ecco 11
Lisbon**

Colofon

Editor in Chief

Karin Magnusson, RN, MSc

Editorial Board:

Jan Foubert, RN, MSc

Carol Krcmar, RN, MN

Emile Maassen, RN, CRN

The Goal of the EONS Newsletter is to inform nurses about EONS and EONS activities and to inspire nurses throughout Europe to improve the care of the cancer patient.

The purpose of this Newsletter is to provide:

- Information on EONS activities
- Practical information of interest for the EONS members
- A networking forum for cancer nurses throughout Europe

Print run: 7500 copies

EONS secretariat

Rudi Briké

Avenue E Mournier 83/4

B-1200 Brussels, Belgium

Tel: + 32 (2) 779 9923

Fax: 32 (2) 779 9937

E-mail: eons@village.uunet.be

Website:

www.cancereurope.org/EONS.html

All correspondence should be addressed to the Editor-in-Chief:
eons@village.uunet.be

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GOTHENBURG, 1 MARCH 2002

Dear colleagues,

Welcome to the March 2002 issue of the Newsletter of the European Oncology Nursing Society! The mission of EONS is to improve the care of individuals with cancer by supporting and enhancing cancer nursing throughout Europe. Members of EONS are individual cancer nurses, national oncology nursing societies, and institutions and agencies in Europe involved in cancer care. EONS currently have a membership of 22 national oncology nursing societies (representing approx. 18.000 nurses), 320 individual members from 28 countries and 15 associate members.

The foremost goal of the Newsletter is to inform nurses about EONS and EONS activities. Further, through articles published in the Newsletter, EONS provides an impetus to inspire nurses throughout Europe to improve the care of the cancer patient. Not only will readers receive updated information on EONS educational and research initiatives, practice-relevant articles written by experts in cancer care will appear regularly. The Newsletter will be published on a quarterly basis and sent to EONS individual members, national societies and Associated members. In each issue of the Newsletter, we plan to publish an article provided by a national society. In this issue, you will find a report from Spain written by Paz Fernandez Ortega. The report is about their national conference, which was held last year. Also included in this issue is an article on patient advocacy, a topic that Kathy Redmond illuminated in her Distinguished Merit honorary lecture at ECCO and a topic that is receiving a lot of press time in many European countries.

Themes for forthcoming issues in 2002 include fatigue (June), nausea and vomiting (September) and lung cancer (December). A society and/or its Newsletter cannot be successful without the active participation of its members and/or readers. To be successful - we need you! We need to know your opinions, thoughts, wishes, criticisms and suggestions. We need you to write papers, make inquiries and provide announcements or just discuss things that come to mind. For example, perhaps you have been involved in implementing changes in your institution or in conducting research within your area and would like to share your experiences with colleagues.

Or, perhaps you have read a new book that you would like to recommend.

Please do not hesitate to contact us with questions or material for the Newsletter! The Newsletter is the only publication of its type intended as a networking forum for cancer nurses throughout Europe. Help us to keep you up to date in the ever-changing area of cancer nursing.

We hope that the newsletter is going to be a successful and useful tool as a link between national societies and individual nurses who are members of EONS.

On behalf of the EONS News Team/

Karin Magnusson, Editor-in-Chief

Time schedule for publication 2002:

Issue	Manuscript submission	Publication date	Theme (under reserve)
June	10-05-2002	17-06-2002	Fatigue
September	09-08-2002	16-09-2002	Nausea and vomiting
December	08-11-2002	16-12-2002	Lung cancer



Our Colleagues from...

It is a pleasure to present our European Oncology Nursing Colleagues the 8th SEEO congress (Spanish Oncology Nursing Society). The Congress took place at the nice setting of Palma de Mallorca, Balearic Islands in Spain during the past year in from 9 - 12 May 2001. Springtime is, without doubt, one of the best moments to visit the Islands.

A total of 693 participants attended the eighth national congress. There were nurse representatives from the different communities and autonomous regions within the large area of Nursing Cancer Care; paediatric and adults, out-patients wards and in-patient, radiotherapy, palliative, home care, University and Nursing Schools as well as managers in cancer care units. The event had great support from the University, professional Nursing Associations, and autonomous and community services. Also present was the support from Regional Cancer Leagues and parents of paediatric patients associations or the NGO "medical smile"(similar to "the clowns for patients "), dedicated to give a very special meaning for children whose lives have been touched by cancer

The main theme in the Convention was:

"CANCER PATIENT IMPELLER of NURSING CARE.

We want to care today, tomorrow and for ever..."

The goals of the congress were:

- Recognise patient and family as a pivotal point for the nursing care
- Promote the therapeutic meaning in nursing
- Update on the newest treatment options

It addressed a number of key issues. The Opening conference presented a special lecture on today's challenge and chronic sense to cancer. Mrs B. Udaeta, a nurse from the Canary Islands, talked about the meaning of cancer care.

On the plenary roundtables there were 58 papers on nursing topics on themes as:

- Extremes in a persons life, childhood and elderly cancer perspectives
- The integration of family in cancer care planning
- Ethic concerns
- How to design integrated information and registering systems
- Evaluation of the product resulting from Nursing Care
- Communication as reliable nursing tool

A quite emotional video was presented on the experience of communication with children with cancer through smiles and laughing by clowns.

Furthermore there were four workshops with updated information on:

- Stoma problems and nursing care
- Palliative Care
- Venous Access.
- Nursing diagnosis and management in cancer care

Also 59 posters were addressed to the scientific committee.

Last day an on-line conference was held regarding new developments in information management and the clear objective of stimulating

vigorous discussion on what should be done in the future. Also the nurse bazaar was a successful and original initiative to make it easy for nurses to exchange information, booklets, sheets and registers from their hospitals and institutions in order to get ideas and perhaps improve ones own written information. Three nurses were finalists to the new initiative of the cancer-nursing writer award. Their work related to own or others experience in the form of short tales. The first award was for "The Experiment", a short thriller story.

We are deeply convinced that dissemination of knowledge and facilitation of communication among novice nurses, nursing students and advanced in practice nurses is the best way to advance the understanding of the coping process in persons with cancer.

For more information you are invited to visit our web page: <http://www.seeo.org>

Paz Fernandez Ortega

Cancer Nursing in Spain

In opposition to other European countries there is no shortage of Nurses in Spain, regardless the bad work conditions for nurses. Especially for the recent graduated nurses. A recent survey in the Catalonian region shows that 89% of nurses think their working conditions are extremely bad and perceived worst than in the past. (Spanish Nursing Council, 2001) There are approximately 182.300 Registered Nurses in Spain. This implies a ratio of 450 nurses per 100.000 inhabitants. More than 80% of the nurses are women. The majority of them is between 30-40 years of age and is working in a hospital. Besides palliative home-care teams, oncology-nursing care in community settings is rare.

Situation on jobs and positions

- Registered nurses are not encouraged to specialise in Oncology. Though there are experienced expert advanced practice nurses and senior nurses, they are not recognised by salary or different position. Many of them have positions in management, far from clinical setting.
- Nurses lacking oncology knowledge and chemotherapy competencies often administer chemotherapy.
- Specialised oncology units are combined with non-specialised units.
- Oncology departments are mainly situated in the regional capital cities.
- All Nurses Educational courses have to be approved by Ministry of Education but each educational law is transferred to autonomy communities. (Basque Country, Catalan, Madrid) So there are significant differences from one region or university to the other.
- There are no competency levels defined by law.

Only some Hospitals are considering define different levels for Nurses in clinical care.

EONS Distinguished Merit Award 2001

It was an honour for the Society to present Ms. Kathy Redmond, a person well known within EONS, with the 2001 EONS Distinguished Merit Award at "Facilitating patient choice - an imperative for cancer nurses" reflects her dedication to furthering the art and science of cancer nursing in Europe in the complete manuscript of her lecture will be published in a future issue of the European Journal of Oncology Nursing. For this issue of EONS newsletter

Collaboration with Cancer Patients: Unleashing

Kathy Redmond - Milan, Italy

Last October, during ECCO-11, Louise Bayne, an ovarian cancer survivor, practising midwife and President of OvaCome, a UK based ovarian cancer advocacy group, provided participants with insight into the important contribution cancer patient can make to improving the quality of cancer care in different European countries. She clearly established cancer patients' right to be members of the multi-professional team and to have a voice at all levels of health care decision making. These rights are enshrined in various charters and declarations such as the WHO's Declaration of European Patients' Rights and more recently, the European Union's (EU) Charter of Fundamental Rights. Unfortunately, they are not always respected and many European cancer patients do not have access to, nor are provided with, good quality information. Moreover, many health professionals do not facilitate patient involvement in decision making and not all policy makers seek out patients' views when making decisions that can have profound impact on their lives. In response, to these inequities and other problems in cancer services, cancer patients across Europe are starting to challenge the status quo and to raise their voices in protest - they have become patient advocates.

Twenty years ago patient advocacy, as we know it today, did not exist. In the mid-eighties, in the United States, people with HIV/AIDS fuelled by the success of the civil rights movement and deeply angered by the horrific social discrimination and ignorance surrounding HIV/AIDS began to advocate for change. They wanted access to better treatments, early access to promising drugs, more equitable access to care and to end the widespread stigma and prejudice and they were prepared to use whatever tactic worked, including acts of civil disobedience, to get what they wanted. As a result they compelled policy makers, drug regulators, researchers, clinicians and pharmaceutical companies alike to listen to them and include them in the decision-making process.

"...it makes sense for cancer patients and nurses to join forces and to lobby for fundamental changes in the political and medical decision making process."

Breast cancer patients watched with interest as AIDS patients achieved success after success and in the late 1980s started to take action themselves. The National Breast Cancer Coalition was formed in 1991 by a group of women with breast cancer with the mission of eradicating breast cancer through political activism and grassroots advocacy. Subsequently, other disease specific cancer patient advocacy groups were established including the National Prostate Cancer Coalition and the National Ovarian Cancer Coalition. Today, American cancer patient advocates have become a potent political force, and consequently, wield significant influence over legislators, researchers, clinicians and regulatory bodies.

Cancer patient advocacy groups are starting to be established in many European countries. This has been easier in some countries than in others. Paternalistic and patronising attitudes towards patient activism are prevalent in many European countries and there is significant resistance to patient involvement from some powerful members of the medical and political establishment. Interestingly, these attitudes are also held towards nurses and, not surprisingly, nurses have experienced the same problems as patients in having their voices heard in the corridors of power. In those countries where such discrimination exists it makes sense for cancer patients and nurses to join forces and to lobby for fundamental changes in the political and medical decision making process.

EU legislation influences the provision of cancer services at a national level and therefore, cancer patient advocates have had to consider how best to have their voice heard at the European level. The EU is made up of fifteen Member States, has eleven official languages and a complicated political process. This means that it has not been easy for cancer patients to get organised and become



*ECCO. The title of her honorary lecture
the interest of improving patient care. The
Kathy made another contribution to this theme.*

a Potent Force

effective at the European level. Perhaps it is not surprising that, to date, only one pan-European cancer patient advocacy group has been established – Europa Donna: the European Breast Cancer Coalition. Organisations such as the European Oncology Nursing Society (EONS) have a role to play in facilitating cancer patient to become more effective at the European level. EONS has already overcome many of the barriers faced by cancer patients advocates in moving forward their European agenda and can therefore help cancer patients optimise their resources and avoid some of the pitfalls involved.

“...partnership, a concept which has underpinned the therapeutic nurse-patient relationship for many years.”

This is also important at a national level where most patient advocacy groups are in their infancy. These groups are confronted by the usual obstacles associated with creating an organisation and must develop skills in fund raising, communication, lobbying and programme development if they are to become viable entities.

Most national oncology nursing societies already possess some or all these skills and could easily facilitate the growth of patient advocacy groups by offering them mentorship and counsel. By doing so they will demonstrate, not only leadership and vision, but also a belief in the concept of partnership, a concept which has underpinned the therapeutic nurse-patient relationship for many years. Furthermore, EONS and national oncology nursing societies could apply this concept further by collaborating with patient advocacy groups to lobby on issues of mutual interest. Collaboration between two natural allies will create a potent force capable of achieving results that are impossible to achieve when both groups work in isolation.



Society News Updates

Change in EONS Leadership

The newly elected Executive Board Members were installed into office at ECCO. **Giel Vaessen** (NL) will now provide leadership for the Society as President and **Jan Foubert** (Belgium) began his term of office as President-elect. The remaining newly and re-elected members of the Executive Board include **Emile Maassen** (NL), **Karin Magnusson** (Sweden), **Alexander Molassiotis** (UK and Greece), **Catherine Miller** (UK), **Paz Fernandez Ortega** (Spain), and **Yvonne Wengström** (Sweden). Executive Board members serve a two-year term of office that commenced in October 2001 and extends until September 2003.

After serving a very successful term of office as President, **Agnes Glaus** has now become Past-president of the Society. One of Agnes' goals for her term of office was to strengthen and enhance the working relationship between the Executive Board and the Advisory Council in order to improve the impact the Society has on cancer care in Europe. Agnes was successful in reaching out not only to members of the Advisory Council, but to individual members and cancer organisations as well to involve them in implementing the 4 Strategic Goals established by the Society. Under Agnes' insightful leadership, a study was launched to assess the status of cancer nursing in EU member states and Switzerland. The database resulting from this study will be used to identify needs, further develop supportive partnerships between countries, and to move forward the development of an expanded network of cancer care. On behalf of the membership, the Board of Directors expresses gratitude to Agnes for her tireless efforts and extends best wishes to her in all future endeavours.

Interest in Accreditation Services growing steadily

After a somewhat slow start, the number of inquiries, applications and approvals for accreditation for courses in cancer nursing is steadily growing. Executive Board Member Alexander Molassiotis has agreed to assume the Chair of the Accreditation Council. In addition to offering accreditation of short continuing education courses and accreditation of post-basic courses (of longer duration), EONS now accepts applications for accreditation of education materials. Educational/learning materials are defined as activities designed to maintain and/or improve cancer nursing knowledge and skills. The activity can be completed at the learner's own pace and at a time of the learner's choice. Educational materials include but are not limited to books, special issues of journals, CD-ROMs and computer disks, video tapes, slides and manuals. Further in the future, the Advisory Council plans to develop a credit point system that will be recognised by national nursing organisations. In this regard, Mr. Molassiotis will be working closely with the Accreditation Council of Oncology in Europe (ACOE) initiated by FECS.

Information on accreditation, including the criteria for accreditation, as well as application forms are available through the EONS Secretariat or by visiting the EONS web page.

New Operating Hours at Secretariat

The Executive Board has decided to reduce the operation of the Secretariat to a 50% basis. Rudi Briké is available to assist EONS members at the EONS Secretariat in Brussels on Mondays, Tuesdays and Thursdays from 8.00 until 13.00 and on Fridays from 8.00 until 12.00.

Change in Membership Fees

Due to increased organisational costs, fees for membership will be increased for the first time since EONS was founded. As of 1 January 2002 the new fee scale is as follows:

• Individual membership (Without subscription to EJON)	£ 18 / € 29
• Individual membership (With subscription to EJON)	£ 41 / € 67
• Associate membership	£ 132 / € 215
• National nursing organisations	
Up to 250 members	£ 220 / € 358
Up to 500 members	£ 330 / € 538
Up to 750 members	£ 440 / € 717
Greater than 751 members	£ 550 / € 896

Awards

It was an honour for the Society to present **Ms. Kathy Redmond**, a person well known within EONS, with the 2001 *EONS Distinguished Merit Award* at ECCO. The title of her honorary lecture "Facilitating patient choice - an imperative for cancer nurses" reflects her dedication to furthering the art and science of cancer nursing in Europe in the interest of improving patient care. The complete manuscript of her lecture will be published in a future issue of the European Journal of Oncology Nursing.

Carolina Godino Galvez is the recipient of the *EONS Young Researcher Award* that will be presented to her at the 3rd EONS Spring Convention. The objective of her research, entitled 'Health Education as a Tool to Decrease Fatigue Perception in Oncology Patients', is to determine if health education interventions decrease the perception of fatigue in patients with digestive cancer. This experimental randomised study will be conducted over 2 years at the Catalan Oncology Institute in Barcelona, Spain. As recipient of the Young Researcher Award, Carolina will present an honorary lecture on her research at the EONS 3rd Spring Convention. The full lecture will be published in a future issue of the European Journal of Oncology Nursing.

Projects

Nutrition in Oncology Educational Program

EONS is pleased to announce the initiation of a new educational program in oncology nursing, supported through a partnership with NUTRICIA. EONS is committed to make a contribution to evidence based cancer nursing practise, to create an opportunity to develop a multidisciplinary approach and to improve the availability of quality nursing to cancer patients in Europe based on patients needs. The objectives of this project are to identify the current knowledge and opinion of oncology nurses about nutrition in European countries. The results of this 'needs' driven approach will allow the EONS to identifying what educational developments are required by our membership. The long-term goal is that these educational materials will help nurses understand the role and the importance of nutrition in cancer and to improve their contribution in daily practise.

Nurses, from a variety of oncology practice settings in European countries will be questioned about nutritional education through focus groups at the 3rd Spring Convention in Venice. However, it is important that the EONS consider the views of all its members that is why a questionnaire is enclosed in this Newsletter. This questionnaire will help us to define educational needs of EONS-members. *Please take a few minutes to complete this questionnaire.*

In a further step a working group with EONS and NUTRICIA experts will develop an educational tool to improve nutritional aspects in oncology nursing. Later this year NOEP will be test implemented in a few European countries before deployment on a wider scale. The final announcement of the educational package will take place at ECCO 12.

EONS and Roche: Optimising Anti-emetic Treatment

EONS is pleased to announce the initiation of a pan-European survey of oncology nurses view and experiences in anti-emetic treatment in selected European countries, supported through a partnership with Hoffman-La Roche pharmaceutical company. EONS is committed to improving the care of individuals with cancer by supporting and enhancing cancer nursing throughout Europe. Conducting a survey of European nurses to advance clinical cancer nursing is just one of the many ways EONS makes contributions to evidence based cancer nursing.

Thirty nurses, from a variety of oncology practice settings, in each of six European countries: Germany, France, Spain, Italy, Netherlands and the UK have been selected to participate. Specifically, the survey is designed to determine the current status of emetic assessment strategies used by oncology nurses with the goal of optimising anti-emetic treatment for patients undergoing chemotherapy or radiotherapy. Results may be utilised to create measurement tools and educational resources specific to anti-emetic therapy and nursing care. The survey results will be announced at the upcoming 3rd annual EONS Spring convention in Venice, on Saturday 13 April 2002.

Report from ECCO 11

The Advisory Council

14 members of the Advisory Council met with the Executive Board at ECCO 11. The representatives were invited to present the current status of their society in the sense of strategies, plans for implementation, new developments, and identified strengths and difficulties in operational procedures. As could be concluded from the presentations, the majority of national societies strive to provide cancer nurses in their countries with high quality educational programs and initiatives have been implemented to improve the nursing care of cancer patients through evidence based practice. Unfortunately, almost all countries continue to struggle to obtain recognition of cancer nursing as a specialty. Discussion focused on these two commonalities. Ideas discussed related to ways to enhance the working relationships between EONS and the national societies were: offer exchange programs and collaborative projects between countries; secure funding for joint projects from, for example, the EU; further collaboration on specific issues relevant to cancer nursing including obtaining and maintaining uniform optimal standards of care throughout Europe. The participants agreed that accreditation, education, standards of care, greater involvement of research nurses and political lobbying activities will be strategic priorities for the work of the Advisory Council in the future.

Country		Number of Nurses attending ECCO	
Sweden	107	Italy	21
The Netherlands	103	France	18
United Kingdom	98	Israel	15
Denmark	58	Switzerland	15
Norway	49	USA	10
Belgium	33	Others	74
Finland	30		
Portugal	24	TOTAL	675

The participants were charged with presenting the issues and suggestions discussed at the meeting with their memberships. A follow-up of the ideas expressed will be included at the next Advisory Council meeting that will take place in conjunction with the Spring Convention on 11 April 2002.

For the first time, a workshop for individual members took place in parallel to the Advisory Council meeting. The intent of this workshop was to provide a forum for individual members to openly discuss their issues and concerns in relation to EONS. President-elect Jan Foubert and immediate Past-president Nora Kearney represented the Executive Board at this meeting. According to the participants, language followed closely by differences in educational preparation are still the major obstacles to overcome to procure more involvement from individuals in EONS activities and projects. As to difficulties experienced in advancing cancer nursing in various European countries, the participants identified and discussed the following:

- a lack of a clear definition of oncology nursing
- difficulties in implementing the EONS Core Curriculum on a national level
- lack of recognition of nursing research as separate from medical research and essential to the nursing profession
- a lack of structured and well-organised educational programs in cancer nursing in some countries.

The idea of providing individual members with an opportunity to discuss items of concern with Board Members was regarded by all in attendance as extremely worthwhile. A synopsis of the workshop was presented to the Advisory Council.

The quality of the Nursing Scientific Programme at ECCO continues to steadily improve. The content of the lectures reflects a growing maturity and refinement of topics that are practice relevant. Many of the posters were reports of results of small, clinical research projects, well conceived and well executed. Participants at ECCO who took the time to evaluate the Nursing Programme rated it very highly. Not very surprising, highest rated were those lectures which dealt with topics of relevance to everyday practice. Suggestions for future ECCO conferences included providing sessions targeted to a specific level of practice (i.e., novice or advanced), more joint sessions with physicians, and include learning objectives in the programme book. Comments and suggestions from the membership are more than welcome and should be sent to the EONS Secretariat. ECCO 12 will take place in Copenhagen, Denmark from 21-25 September 2003.

Events

For information on future events, please visit the EONS web page.

FOCUS ON FEEDING

NUTRICIA'S NUTRITIONAL THERAPY ADD-ON TO YOUR CANCER THERAPY

Malnutrition is common in cancer patients and is associated with reduced well-being and poorer clinical outcome.^(1,2) It is, therefore, important to maintain or

even improve nutritional status before, during and after cancer therapy.^(1,2)

Nutritional support has been shown to be effective in achieving this.^(2,3) NUTRICIA's range of clinical nutrition products and FLOCARE medical devices will help to improve nutritional intake, and as an add-on to your standard therapy will be beneficial for both you and your patients.



⁽¹⁾ Nitenberg G, Raynard B. *Crit Rev Oncol Hematol* 2000;34:137-68.
⁽²⁾ Bozetti F In: Payne-James et al (eds). 2nd ed. London: GMM, 2001:639-80.
⁽³⁾ Den Broeder E et al. *JPEN* 2000;24:351-60.





Nutricion Education Needs Questionnaire

NUTRICIA

Nutrition in Oncology Educational Program

This 'Needs Analysis' has been commissioned by Nutricia Healthcare for the European Oncology Nursing Society (EONS). The aim is to identify the education needs (if any) for a programme in nutrition. Completion of this questionnaire will take no more than 10 minutes and we would like to thank you for taking the time to complete.

If you want to be eligible for a prize draw, please fill in name and address.

Name: _____

Address: _____

Please note that all information relating to this 'needs analysis' remains confidential and all details summarised from this work will remain anonymous.

Part 1 **General Information**

Country: _____

Position:

- Lecturer/clinical teacher
- Oncology nurse (adult)
- Nurse (medicine)
- Nurse homecare
- Haematology

- Manager
- Oncology nurse (paediatric)
- Nurse (general surgery)
- Primary care
- Other _____

Number of years qualified: _____

Briefly list the education/training programmes (not compulsory courses e.g. fire) you have undertaken in the last year and a half (18 months)

Education/Training programmes

1. _____

3. _____

2. _____

4. _____

Part 2 **Specific Information**

How is your uptake of education/training courses normally funded? (If required tick more than one box.)

- Employer
- Self
- Other (please specify) _____
- Grant
- Industry

Is it important to you that the education and training programmes you do are accredited?

- Very important
- Not important
- No strong feelings
- Accreditation does not exist in my country

How much study leave do you get a year? _____ days

What areas of cancer care are you most interested in learning more about?

AREA OF CANCER CARE		
1.	2.	3.

What is your preferred mode of delivery for education and training?

(Please rank in order of preference 1 = most preferred)

- | | |
|--|---|
| <input type="checkbox"/> Courses | <input type="checkbox"/> Distance learning (tutor supported) |
| <input type="checkbox"/> Work based learning | <input type="checkbox"/> Electronic (i.e. web based / CD ROM) |
| <input type="checkbox"/> Other | |

When studying what environment best suits you?

- | | |
|--|--|
| <input type="checkbox"/> Home | <input type="checkbox"/> Self study programmes |
| <input type="checkbox"/> Formal study days | <input type="checkbox"/> Other (i.e. bus, train) |

Do you use computers at work?

- yes no

If yes, do you use them regularly?

- yes no

Please tick the programs you use:

- | | | |
|-------------------------------|---------------------------------|--------------------------------------|
| <input type="checkbox"/> Word | <input type="checkbox"/> Access | <input type="checkbox"/> PowerPoint |
| <input type="checkbox"/> SPSS | <input type="checkbox"/> Excel | <input type="checkbox"/> Other _____ |

Do you have access to a computer at home?

- yes no

If yes,

do you use computer at home regularly? yes no

are you connected to the Internet at home? yes no

are you interested in learning more about nutrition and cancer? yes no

Are you interested in learning more about nutrition and cancer? yes no

If yes, what topics would you like to know more about?

(Make 3 selections from the list below and rank in order of preference 1 = of most interest.)

- Methods of improving nutritional intake in cancer
- Artificial nutrition support in cancer (i.e. enteral feeding)
- Ethical issues of nutritional support in palliative care
- Management of dysphagia
- Aetiology of cancer cachexia
- Nutritional assessment and of cancer patients
- Managing altered smell and taste in malignant disease
- The role of nutritional care in symptom control in cancer
- Other (Please specify),

On behalve of the EONS and Nutricia Healthcare, we thank you for taking time to complete this questionnaire.

Please return completed forms by post or fax before the end of March 2002 to:

European Oncology Nursing Society

Secretariat/NOEP

E. Mounierlaan 83/12
1200 Brussels - Belgium
Fax: 003/2.779.99.37



We need your views!

FECS Leonardo da Vinci Survey:

What are the needs in CME in oncology in Europe?

Project supported by the European Commission

We would be grateful if you could fill in this questionnaire and return it to the attention of Françoise Van Hemelryck at FECS secretariat, 83, avenue Mounier, B-1200 Brussels, fax: + 32 2 775 02 00, e-mail: francoise@feces.be Thank you.

Country: _____

Specialty: _____

Profession: _____

Position: _____

Part I. Continuing Medical Education (CME) accreditation

1. What are your main incentives to participate in CME activities?

(You can circle more than one if appropriate.)

- Professional
- Moral/ethical
- Legal (CME is mandatory in my country)
- Reimbursement system
- Rectification
- Other (please specify):

2. Are you mainly attending CME activities, which have been accredited?

- yes
- no

3. Do you believe that a system of mutual recognition of CME credits would be useful

a) between European countries?

- yes
- no

b) between European countries and the USA?

- yes
- no

c) between European countries and other countries (other than USA)?

- yes
- no

4. Would you be in favor of accreditation systems for enduring materials?

(CME journals, CD-ROMs, web-based CME programs, etc.)

- yes
- no

Part II. CME events (workshops, conferences, lectures, congresses, etc.) and activities.

5. a) Do you preferably attend CME events which are:

- Regional
- National
- European
- International
- No preference as such

b) *is your preferred option mentioned above a question of:*

- Language
- Costs
- Time
- Other, please specify: _____

6. *What type of CME activity would you like to see developed (further) as a priority?*

- web-based educational materials
- new CME events and workshops
- other educational materials (CD-ROMs, videos, etc.)
- other. Please specify:

7. *In your view, what are the main weaknesses of existing CME events, if any?*

(you can select more than one if appropriate)

- some subjects are not sufficiently covered If so, which one(s)? _____
- quality standards often not satisfactory
- events are too long
- CME credits not recognised in my country
- events are too expensive
- events are mostly not in my native language
- other. Please specify:

8. *Do you have any concerns about CME activities being driven by industry?*

- yes no

9. *If you could express one wish concerning CME activities, what would it be?*

Any comments:
