SIOP will meet these ambitious goals by strengthening its strategic partnerships and steering the Plan’s implementation. We are currently setting up several cross-tumour platforms and projects to address the critical variables influencing success, such as outcome research, radiotherapy quality assurance, development of new innovative paediatric oncology drugs, education and training, ethics and psycho-social aspects of childhood cancer and ‘oncopolicy’ at the EU-level. The SIOPE community is also engaging in the creation of a European Reference Network to facilitate access to cross-border healthcare for childhood cancer patients across Europe via the ExPO-net project: www.expornet.eu.

A stronger multidisciplinary cooperation between all types of professionals involved in the care of young patients and survivors is therefore crucial to make this Plan a success. SIOPE supports paediatric cancer professionals to do their best work in several areas – from treatment to research, from long-term follow up to education – and facilitates regular exchange between professionals, patients, and other stakeholders who can make a difference – such as specialised paediatric oncology nurses.

**Major role of oncology nurses**

Experienced nurses have an essential role in young patients’ everyday lives and, therefore, should be part of this common endeavour. We have already established a close cooperation with EONS to tackle common issues, especially via the SIOPE-EONS-ECCO joint project ‘Collaboration between nurses and doctors in paediatric oncology’, which demonstrated the need for quality multi-professional team-working. It is widely recognised that multidisciplinary standard care is highly beneficial for a patient-centred approach to cancer care, and this is even more true for paediatric oncology, a field in which care and research are integrated in daily treatment and care. Paediatric oncology nurses bridge the information gap that often exists between families and doctors, play a major role in the patient follow-up, and are particularly important to provide age-appropriate care in the case of teenagers and young adults – often marginalised and looked after in either children or adult wards.

Nurses are part of our common vision to achieve a brighter future for children and adolescents with cancer, and I trust that a stronger multi-professional partnership with nurses, via EONS, will be one of the many initiatives inspired by the Plan. Our children’s lives depend on how we will be able to jointly make this ambitious strategy a reality in the near future.

For more information: www.siope.eu or contact the SIOPE Office (office@siope.eu).

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**When a parent has cancer**

Lucy Grant and Amrit Sangha

A pilot project to enhance nurses’ skill in supporting patients to talk with their families about their illness has been launched with the help of an EONS research grant. The results will be published by December 2016. Here is the story so far.

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**When a parent has cancer, parents and children face many practical and emotional challenges.**

All family members can experience significant distress and are at greater risk of mental health problems. There is a need for family-centred care. However, patients report that family issues are not routinely addressed and do not feel they are encouraged to discuss their concerns.

Oncology nurses are key providers of care when a parent has cancer. They often report significant challenges with this role, including a high emotional burden, lack of confidence and skills, feeling inadequately prepared and unsupported. To cope, nurses can distance themselves from patients’ emotional concerns. Education and supervision initiatives are needed to equip nurses with adequate skills, knowledge and support to improve quality of care.

Building on previous research that focused on developing a three-day education programme, we created a combined education and supervision programme to enhance nurses’ skill in supporting patients to talk with their families about their illness. The UK Medical Research Council guidance for evaluating complex interventions was followed, beginning with an examination of theory and research, and consultation with experts. The education programme content incorporates attachment theory, child development and family systems theory. A group supervision component was added following on from the education programme to facilitate the transfer of skills into practice and offer nurses support.

We hope to establish the efficacy and sustainability of the programme with a view to rolling it out to other countries. A prospective repeated measures design is employed, using qualitative and quanti-