



Position Statement on the National Cancer Nursing Shortage

The burden of cancer in Australia

Cancer is a major health problem in Australia. One in three men and one in four women will be diagnosed with cancer before the age of 75. It remains a leading cause of death in this country. Those diagnosed with this disease will often experience significant psychological and social burden. Moreover, the economic impact of cancer on the Australian community is substantial, consuming about 6% of the overall direct government expenditure on health¹.

The Cancer Nurses Society of Australia (CNSA) is concerned that the current nation wide shortage of cancer nurses is worsening², and that this shortage is impacting on the quality of cancer care in this country. Immediate steps need to be taken to reverse this problem.

- ❑ **This position statement identifies several key strategies that are critical for addressing the shortage of cancer nurses in Australia.**
- ❑ **Implementation of the strategies outlined in this statement will help to overcome the impact that the shortage of cancer nurses is having on the quality of cancer care in this country.**

The contribution of cancer nurses to cancer control in Australia

Services Provided by Cancer Nurses

Specialist cancer nurses are integral members of the multidisciplinary team, providing essential health services for people diagnosed with cancer in inpatient, outpatient, extended care, hospice and community settings. The broad range of services provided by cancer nurses include:

- implementation of national cancer screening programs
- administration of specialised cancer treatments
- monitoring of patient's progress and response to treatments to ensure early identification of health needs
- providing education and support to prevent and overcome cancer related physical and psychological problems
- teaching and coaching patients and family members to promote effective self care
- delivery of palliative care interventions to promote quality of life.

Nurses' Role in the Coordination of Cancer Care

Cancer nurses' pivotal role in the health care team places them in a unique position for ensuring safe and cost effective coordination of services across the various sectors of the health system. Nurses also play a major part in delivering services to underserved populations, such as rural and remote communities.

Nurses' Role in Ensuring Safe and Cost-Effective Cancer Care

There is good evidence that the right number of nurses and the right skill mix has cost benefits. Several large government-commissioned studies in

the US demonstrate the important contribution of nursing to a broad range of patient outcomes, particularly adverse events and length of stay³. These studies indicate higher RN staffing was associated with a 3-12% reduction in adverse outcomes, and higher staffing at all levels of nursing was associated with a 2-25% reduction in adverse patient outcomes⁴.

People with cancer have a disease that can affect multiple body systems. They will often undergo specialised treatments that place them at risk for a range of debilitating and sometimes life threatening health problems. Specialist cancer nurses have a major role in prevention and early identification of these disease and treatment-related problems.

Nurses' Role in Enhancing Psychosocial Outcomes for People with Cancer

The prevalence of long-term psychological distress in people with cancer is estimated to range from 20% to 66%⁵. In the context of cancer, there is good evidence from studies in Australia and overseas that specialist cancer nurses can reduce psychosocial morbidity associated with cancer, enhance early recognition of support needs and provide continuity of care^{5,6}.

In Australia, studies in the context of breast cancer also provide evidence that specialist cancer nurses are acceptable to other health professionals, highly valued by consumers, and very cost effective⁵. Potential cost savings of \$4.85 million per year have been estimated if breast cancer nurses were available to all women with breast cancer during key points in the course of diagnosis and treatment of cancer⁷.

Understanding factors contributing to the shortage of cancer nurses

The current shortage of cancer nurses exists in most countries across the world, reflecting both a supply and demand problem. Several factors are contributing to the shortage, including:

Growing demands for cancer nursing services

The ageing of the population is resulting in an increased demand for cancer services. Advances in the treatment of cancer also requires a nursing workforce with increasingly specialised skills.

Decreasing enrolments in specialist postgraduate cancer nursing courses

Available data indicates a steady decline in enrolments in postgraduate specialist courses since 1996⁸. Reports suggest the cost of higher education for nurses is acting as a major barrier to entry into

specialist postgraduate courses in areas such as cancer nursing, especially as completion of such qualifications does not necessarily result in increased remuneration or automatic career advancement⁸.

The shortage of specialist cancer nurses is likely to be exacerbated if the trend to increasing costs for higher education continues.

Difficulties with recruitment and retention of nurses

People today have a greater number of career choices and employment options. There is an increasing casualisation of the nursing workforce, and nursing turnover rates appear to be increasing⁸. A recent benchmarking survey has reported that 50% of a sample of 6,800 nurses from 50 public and private health facilities in Australia were at risk of leaving nursing. Of the 18 nursing specialties who responded to this survey, oncology nursing was identified as the group with the highest risk of turnover, with 70.5% of respondents classified as being at risk of leaving nursing or their organisation⁹. While difficult to quantify, the impact of such trends on health care organisations in terms of costs and quality of care is likely to be substantial.

Increasing workloads and patient acuity

On average, patient numbers per full-time equivalent nurse have been increasing over several years. Over a five-year period from 1993-94 to 1998-99, average length of stay in acute hospitals has decreased by 19% from 4.6 days to 3.7 days, while acute hospital separations has grown 2.7 per cent annually².

The implications of these trends for nursing workloads have been enormous. Submissions to the current Commonwealth Government's National Review of Nurse Education have highlighted that many nurses believe present staffing arrangements are compromising the care they provide⁸.

Workload pressures are exacerbating the current nursing shortage. A recent Australian study has reported that around 50% of a sample of 243 cancer nurses reported dissatisfaction with workloads. These workload pressures were identified as the most common reason for considering leaving the specialty. Moreover, the study identified cancer nurses were at high risk for burnout, with around 70% of the sample experiencing moderate to high levels of emotional exhaustion. Importantly, almost 35% of this sample were unwilling to commit to staying in cancer nursing for the next 12 months¹⁰.

Strategies for overcoming the cancer nursing shortage

It is the position of the Cancer Nurses Society of Australia that the shortage of cancer nurses is seriously impacting on the quality of cancer care in this country, and that these effects are likely to worsen unless immediate steps are taken to reverse the problem. The CNSA recommends the following strategies be implemented as a matter of priority to reverse the current shortage of cancer nurses in Australia.

Workforce Planning Strategies

Given the contribution that nurses make to reducing the burden of cancer in this country, coordinated national strategies to recruit and retain enough cancer nurses to meet future workforce needs are urgently required. These strategies should address nursing workforce needs across the care continuum, including health promotion, screening and early detection, treatment, rehabilitation and palliative care, as well as the needs of special populations.

Strategy 1: The Australian Health Workforce Advisory Committee (AHWAC) should identify cancer nursing as a priority for national workforce planning.

Patients with cancer are cared for in many health care settings, and in various units or departments in health care facilities. These can include bone marrow transplant, intensive care, medical, surgical, paediatric, and specialist chemotherapy, radiotherapy or palliative care units. Currently, there are no well-established and validated models to determine appropriate staffing levels. It has been suggested that such staffing models are required to ensure adequate standards of care, as well as reduce nursing turnover. Given the complexity of cancer care, it is further suggested that such models should take into account patient acuity, setting, skill and experience of RNs, available ancillary staff, technology, and each individual patient and family¹¹.

Strategy 2: Funding should be provided to develop cancer nurse staffing models in inpatient, outpatient and community settings.

Education Strategies

Dedicated funded places need to be secured in postgraduate nursing courses to meet future workforce needs. Improved provisions for study leave are also necessary to enable nurses to participate in specialist cancer nursing courses.

Strategy 3: Relief from HECS and other course fees should be provided to overcome the financial barriers nurses face in undertaking postgraduate cancer nursing courses. Financial support is required to enable nurses to take leave to pursue further studies.

The availability of education programs in cancer nursing requires nursing faculty and clinical nurse educators with appropriate expertise in the specialty. Education providers and health care organisations should collaborate on initiatives that will facilitate greater accessibility of educational opportunities for cancer nurses, and enhance learning outcomes from these programs.

Strategy 4: The establishment of more joint academic-clinical appointments in cancer nursing should be encouraged.

Strategies for Enhancing the Benefits of Cancer Nursing Services for Patient Outcomes

Research is required to evaluate the effectiveness of specialist nurses in reducing the burden of cancer in this country. Some examples include:

- evaluation of the effectiveness of the specialist breast nurse model for other patient populations
- evaluation of nurse led clinics, and nurse practitioner roles in improving outcomes for people with cancer and the health system.

Strategy 5: Studies should be undertaken to evaluate the efficacy of specialist cancer nurse models in improving outcomes for all patient populations with cancer.

Research to develop and evaluate innovative models of cancer care involving specialist cancer nurses should be undertaken.

Strategies to Improve Recruitment and Retention of the Nursing Profession

The Cancer Nurses Society of Australia further strongly supports initiatives that will assist with recruitment and retention of nurses in all areas of health care. These include identifying strategies for managing nursing workloads, improving the work environment through flexible rostering and family friendly work practices, developing a career structure which rewards specialist practice, and demonstrating a greater commitment to multidisciplinary approaches to health care. In addition, programs that

effectively support new graduates and nurses choosing to re-enter the profession should be supported.

Moreover, the Cancer Nurses Society of Australia urges the Commonwealth Government to support initiatives which enable the nursing profession to achieve the requirements outlined by the International Council for Nurses for ensuring the orderly development of specialisations in nursing. These elements are:

- the adoption of a systematic means of determining and designating nursing specialities combined with minimum standards in regard to education, experience, performance and the maintenance of competence;
- the establishment of regulatory mechanisms for nursing specialists to ensure a certain level for competence; and
- nursing resource planning with coordination of nursing education and workforce planning as an integral part of health system development.

THE CANCER NURSES SOCIETY OF AUSTRALIA: OUR MISSION AND OBJECTIVES

The Cancer Nurses Society of Australia has a membership of approximately 800 registered nurses dedicated to excellence in patient care, research, and education in cancer nursing. The Society is committed to achieving and promoting excellence in cancer care through the professional contribution of nurses.

As the peak national body representing cancer nurses in Australia, the CNSA is actively working with the National Nursing Organisations, other professional nursing organisations, and state and federal government and non-government organisations to address the current shortage of cancer nurses in this country.

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FOR FURTHER INFORMATION, PLEASE CONTACT:

**Associate Professor Patsy Yates
Chair, Cancer Nurses Society of Australia
GPO Box 4708,
Sydney, NSW, 2001.
Ph: 0738643835
Email: p.yates@qut.edu.au**
