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Eijk-Hustings, YV, Buss, B, Fayet, F et al. (2013) Dissemination and evaluation of the EULAR recommendations for the role of the nurse in the management of chronic inflammatory arthritis. In: EULAR Congress, 12-15 Jun 2013, Madrid, Spain.

https://doi.org/10.1136/annrheumdis-2013-eular.1126

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THU0598: Dissemination and evaluation of the EULAR recommendations for the role of the nurse in the management of chronic inflammatory arthritis

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Background:

Large differences for the role of nurses in the management of chronic inflammatory arthritis (CIA) exist between countries and across regions. Recently, EULAR recommendations for the role of the nurse in the management of CIA have been developed (1).

To enable a homogenisation of rheumatology nursing care, the recommendations need to be widely adopted by the major stakeholders of care: nurses, rheumatologists and patients.

Objectives

The objectives of this study were to a) disseminate the EULAR recommendations among nurses, rheumatologists and patients, b) assess the agreement with the recommendations, c) assess application of the recommendations in daily practice and d) identify potential barriers for implementation.

Methods

A web-based survey with 3 slightly different versions for nurses, rheumatologists and patients was distributed throughout Europe and the USA. Snowball sampling was used to reach as many nurses, rheumatologists and patients as possible. Agreement and application of the recommendations were asked for on a 0-10 scale (0: none, 10: high agreement/application). The participants could indicate potential reasons for disagreement and/or potential barriers to the application of each recommendation.

Results

In total, 3594 persons (967 nurses, 2034 patients, and 548 rheumatologists) from 23 countries participated. The nurses had 10.4 (8.0) years of clinical experience in rheumatology but only 37% followed some kind of rheumatology training. The rheumatologists had 16.4 (9.7) years of clinical experience in rheumatology. Forty seven percent of the patients had access to rheumatology nursing care.

Mean level of agreement with the recommendations varied per recommendation and was highest among nurses (between 8.1-9.8) and lowest among rheumatologists (between 6.8- 9.5). Mean level of application also varied per recommendation and was highest among nurses (between 5.6-7.3) but lowest among patients (between 2.6-5.7).

Agreement and application were significantly lower in Eastern- and in Central Europe compared with other regions. The most commonly reported reasons for disagreement were too many other responsibilities (nurses), doubts about knowledge of the nurse (rheumatologists) and fear to lose contact with the rheumatologist (patients). The most commonly mentioned barriers for application were lack of time (nurses), insufficient number of nurses (rheumatologists) and the service not being offered (patients).

Conclusions

Through this survey the EULAR recommendations for the role of the nurse in the management of CIA have been disseminated among nurses, rheumatologists and patients across Europe and the USA.

Overall, agreement with these recommendations is high, but application is lower. Furthermore, agreement and application differ across regions. The survey yielded valuable information that can support strategies for further implementation of the recommendations.

References

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Cite this as

Van Eijk-Hustings Y, Buss B, Fayet F, Moretti A, Ndosi M, Ryan S, Savel C, Scholte-Voshaar M, de la Torre-Aboki J & van Tubergen A. THU0598 Dissemination and Evaluation of the Eular Recommendations for the Role of the Nurse in the Management of Chronic Inflammatory Arthritis. *Ann. Rheum. Dis.* 2014;72(Suppl 3):A367-A367. doi:10.1136/annrheumdis-2013-eular.1126

URL: http://ard.bmj.com/content/72/Suppl_3/A367.2.full.pdf