

NEWS FROM BRUSSELS



Word from Senior Policy Advisor Dr. Theodoros Koutroubas

Dear Friends,

In an era of mounting pressure on healthcare systems, innovation is pushing back on multiple fronts. VR training is proving more effective than traditional methods at preparing nurses for violent patient encounters, whilst Paris-based startup Parallel raised 20M US\$ to automate hospital administration with AI — freeing staff for what actually matters.

In the UK, the government seems to acknowledge indeed the value of nurses.

With nearly 5 million cancer patients discharged from EU hospitals in 2023, the scale of the challenge has never been clearer.

Do come back with feedback.

Warm regards,

Theo

NEWSLETTER HIGHLIGHTS

VR simulation boosts nurses' skills in handling aggressive patients

UK: Nurses to benefit from boost to graduate pay and job progression

Parallel raises \$20M to scale AI solutions for hospital administration

EU hospitals released 5 million cancer patients in 2023

VR simulation boosts nurses' skills in handling aggressive patients

A 20-minute VR programme developed at Edith Cowan University uses branching scenarios to train adaptive de-escalation skills in unpredictable patient encounters. Amid mounting cases of hospital violence, a virtual reality-based programme developed at Edith Cowan University (ECU) in Australia has been shown to help nursing students become more confident and prepared in managing aggressive patients.



WHAT'S IT ABOUT

The study, done by an ECU doctoral student, **Joshua Johnson**, recruited 221 undergraduate nursing students to complete a 20-minute VR de-escalation training programme, I-VADE. The scenarios focus on communication, situational awareness, and decision-making under pressure, the same core skills clinicians rely on during real interactions, shared **Associate Professor Brennen Mills**, who led the development of the I-VADE programme.

"Rather than training people to follow a fixed script, the experience is designed to expose users to a range of behaviours and escalation patterns, requiring them to adapt in the moment. That variability is important, because in practice, no two incidents are the same," he told Mobihealth News.

FINDINGS

"We had an overwhelmingly positive response from the students that took part in the study. We found a statistically significant improvement in their confidence to manage patient aggression," Johnson was quoted as saying in a media release.

"In trials and early deployments, we've seen improvements in participants' confidence and perceived preparedness, and clinicians have reported applying techniques from the training in their day-to-day practice," added A/Prof Mills.

"Our initial implementations of I-VADE in Western Australia were managed and overseen directly by us. But this research saw the I-VADE programme be administered on the other side of the country, and by people who had no part in the programme's development," Johnson said.

I-VADE was created by the ECU Simulation and Immersive Digital Technology Group, in collaboration with a clinical advisory group consisting of hospital-based work health and safety managers, workplace violence training coordinators, and experienced frontline healthcare workers.

WHY IT MATTERS

Citing recent government data, the ECU media release notes that hospital assaults in Australia increased by around 50% across Queensland, New South Wales, and Victoria between 2015 and 2018. It also cited a survey of over 3,000 Australian nursing and midwifery staff, which found that almost eight in 10 experienced recent workplace violence.

Johnson said that **persistent exposure to these incidents results in burnout, workplace absenteeism, early exit from the profession**, and diminished capacity to treat and manage patients effectively, **thus exacerbating the staff shortage issue among nurses** that we have shared in our previous Letter From Brussels.

"Workplace violence preparedness training in healthcare is recognised as important, but in practice, it's often inconsistent and limited in how it's delivered," claimed A/Prof Mills. "A traditional mix of classroom-based education, online modules, and occasional simulation sessions may be useful for building awareness and understanding policies, but it struggles to replicate the complexity and pressure of real-world clinical interactions," he said. "Managing aggression is highly situational; it involves communication, body language, and decision-making in rapidly evolving situations."

As those who enter the health profession feel underprepared when they encounter real incidents, A/Prof Mills said, the sector increasingly sees the **need for "more immersive, practical, and measurable training approaches that better reflect the realities of frontline care."**

According to the I-VADE lead developer, data captured by the VR-based platform, including decisions, helps learners understand how their communication and decision-making influence outcomes.

"For organisations, it provides visibility into training engagement and how staff are responding across different scenarios, which can support more informed education and workforce development," the ECU associate professor added.

THE LARGER TREND

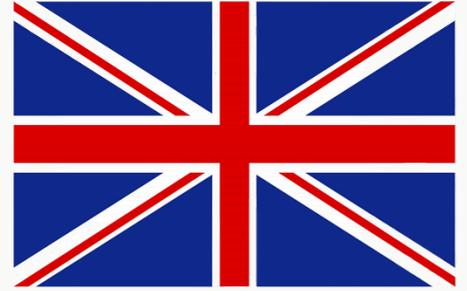
Another VR-based training programme developed at ECU helps paramedics and ambulance officers prepare for unplanned out-of-hospital births. Called NEONATE, it features a 30 to 40-minute VR simulation of neonatal care scenarios during birth emergencies.

A similar programme in Hong Kong has been shown to improve the skills and confidence of carers of high-risk infants.

Meanwhile, VR programmes in Thailand and Singapore have gamified the training for emergency collaborations and intravenous cannulation.

Nurses to benefit from boost to graduate pay and job progression

NHS nurses are set to receive a career boost, as the government and the Royal College of Nursing (RCN) has agreed a major package to properly recognise the vital work they do.



Nursing and nurses are essential to leading and delivering the government's 10 Year Health Plan for England, are critical for patient safety, experience and outcomes, but **the profession has been undervalued in the NHS for far too long**. Too many nurses are not being compensated appropriately for the work they do, and there is currently no universal preceptorship programme in place for new graduate nurses.

The UK government has agreed to a series of measures which will transform the nursing profession and make sure that nurses get the pay and support they deserve.

This includes:

- **Prioritising increasing graduate pay**
- **Reviewing the roles and pay bands of every band 5 nurse, the entry level grade.**
- **Establishing a single national nursing preceptorship to create a national framework to support newly qualified nurses**

Referring on those news, **Health and Social Care Secretary, Wes Streeting**, said:

“(...) many nurses are not being fairly compensated for the work they do. That’s why this government is working constructively to deliver a fair day’s pay for a fair day’s work for nurses.
(...)”

I hope nurses feel heartened that this is a significant leap forward for their profession - and a sign of just how much the NHS and this government values them. Nurses were there for me when I had cancer - I want to be there for them.”

Duncan Burton, Chief Nursing Officer for England, said:

“A new national nursing preceptorship - where newly registered nurses are guided by experienced practitioners - will provide stronger support as nurses transition into practice, helping to build confidence, capability and retention across the nursing workforce.

Today’s announcement demonstrates a clear commitment to valuing nurses, supporting their professional development and investing in a sustainable nursing workforce for the future.”

This announcement **comes ahead of discussions with health unions** on improving the Agenda for Change pay structure, which the government has committed to fund following NHS Pay Review Body recommendations in both 2024 and 2025. Backed by a funded mandate from the government, unions and employers will agree changes to the Agenda for Change pay structure to benefit employees. One of the conditions will be that pay for all graduates should be increased, with the NHS Staff Council deciding the level of uplift. **This will not only benefit graduate nurses, but also other vital NHS professions such as occupational therapists, pharmacists and speech and language therapists.**

For years, too many nurses have been working at a higher level without being paid fairly for it. Like all NHS workers, nurses have the right to be paid for the work they are asked to do, and for their pay to be re-evaluated if they believe they are working at the wrong grade.

Additional funding will be made available to support the band 5 review process and any resulting salary uplifts - separate to the funding for the 2026 to 2027 cost of living pay award and pay structure reform discussions. **The government will also review evidence to determine whether further action is needed to make sure all nurses are being paid fairly.**

Alongside problems with pay, too few nurses are currently benefitting from structured career support right from their first graduate role. The Chief Nursing Officer (CNO) for England will lead work with unions, employers and stakeholders to **improve the quality and consistency of preceptorships - one to one support programmes which give newly qualified nurses the best possible start to their career** - across the country.

To conclude, nursing leaders and workforce bodies have broadly welcomed government commitments to improve pay and support for NHS nurses, emphasising that better starting salaries, a review of Band 5 roles to address accumulated underpayments, and a national preceptorship programme are all essential steps toward making nursing a more attractive graduate profession, retaining staff through the critical early career stage, and building a more resilient and sustainable NHS workforce for the future.

Parallel raises \$20M to scale AI solutions for hospital administration



Parallel develops AI agents to automate hospital administrative workflows, improving efficiency and reducing manual work across coding, billing, and operations.

Paris-based **Parallel**, a startup developing AI agents for hospitals, has raised \$20 million in a Series A round led by **Index Ventures**, with participation from Frst, Y Combinator, Hexa, and several angel investors. The funding follows a \$3.5 million seed round less than a year earlier, with the company's technology already deployed across multiple public and private hospitals.

Hospitals continue to rely on complex administrative workflows spread across legacy systems, requiring staff to manually navigate software, input data, and complete repetitive tasks across areas such as coding, billing, and admissions. These processes consume significant resources and reduce the time available for patient care.

Parallel addresses this challenge with AI agents that operate directly within existing hospital software. Rather than requiring deep integrations or system replacements, the platform functions as an AI layer that learns to use software similarly to a human, enabling deployment in a matter of weeks.

“Because our technology runs on top of legacy systems rather than requiring deep integration, our agents can automate a wide range of administrative tasks in healthcare. That means less time and resources spent on cumbersome, manual processes,” said **Paul Lafforgue, co-founder and CEO of Parallel.**

The company's initial focus is medical coding, a key workflow that translates clinical data into standardised codes for reimbursement and reporting. By improving accuracy and optimisation, Parallel aims to **help hospitals capture appropriate revenue. The company plans to expand its AI agents into additional administrative functions, including billing and admissions.**

With **administrative costs accounting for a significant share of healthcare spending and demand for care increasing**, Parallel is positioning its technology as a way to improve efficiency in resource-constrained systems.

The new funding will support the expansion of Parallel's coding solutions, international growth, and the development of additional AI agents to automate hospital workflows, alongside team expansion.

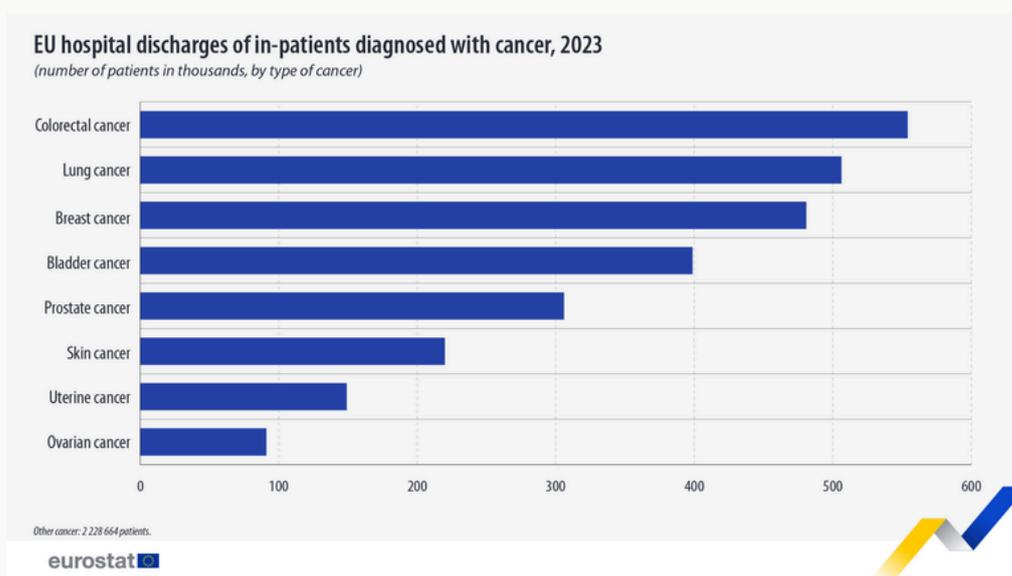


eurostat



EU hospitals released 5 million cancer patients in 2023

In 2023, hospitals across the EU discharged 4.9 million in-patients diagnosed with cancer. Among these patients, colorectal cancer was the most common diagnosis (554 112 hospital discharges; 11.2% of all discharged cancer patients), followed by lung cancer (506 372; 10.3%) and breast cancer (480 922; 9.7%).



In 18 EU countries, colorectal cancer was the leading diagnosis among discharged resident in-patients suffering from cancer. The discharge rate was highest in Croatia (360 discharged colorectal cancer patients per 100 000 inhabitants), Latvia (243) and Austria (239). In contrast, the lowest discharge rates were reported in Malta (31 patients per 100 000 inhabitants), Luxembourg (56) and Ireland (58).

