

Preparation for preventing cancer in practice

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Nursing in numbers



43,820

whole-time equivalent registered nurses in NHSScotland

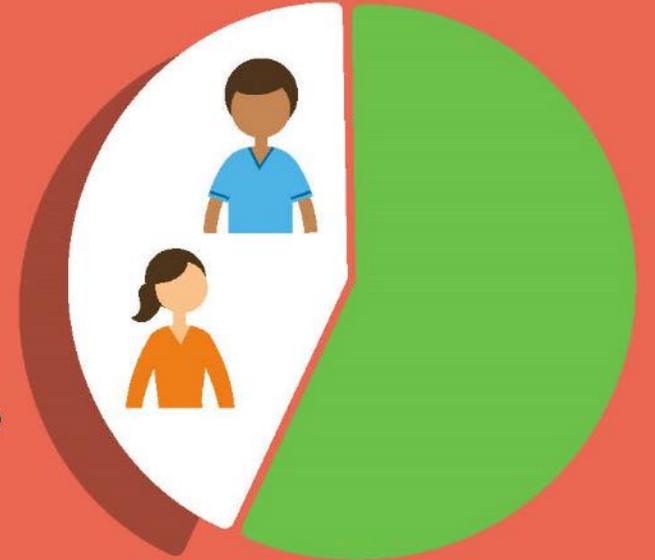


9,939

average total number of nurses in training (including 1st, 2nd and 3rd-year students) each year since 2007

43%

proportion of NHSScotland workforce made up by nurses



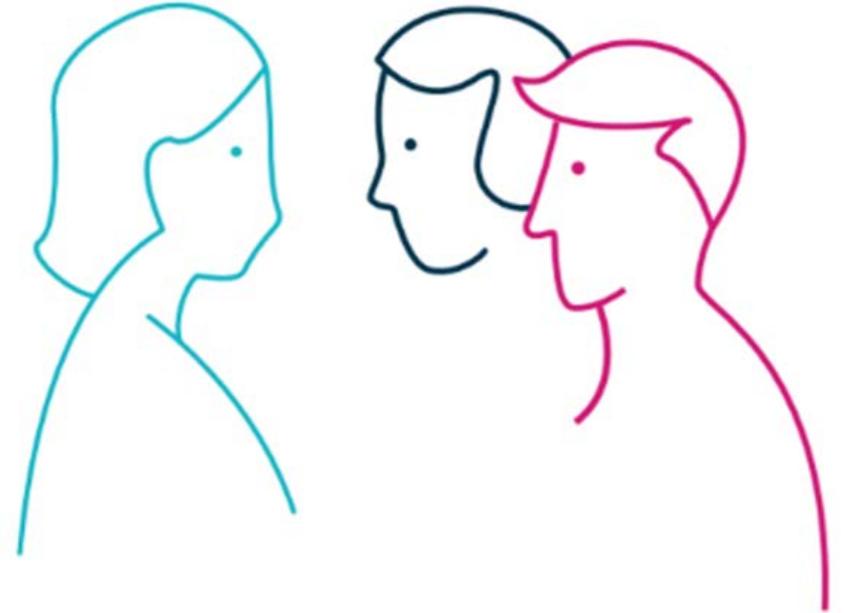
¹ Data collated from Scottish Government, Information and Statistics Division, NHS Education for Scotland and Scottish Social Services Council sources, current to July 2016.

Platform 2 Promoting health and preventing ill health

At the point of registration, the registered nurse will be able to:

2.1 understand and apply the aims and principles of health promotion, protection and improvement and the prevention of ill health when engaging with people

2.4 identify and use all appropriate opportunities, making reasonable adjustments when required, to discuss the impact of smoking, substance and alcohol use, sexual behaviours, diet and exercise on mental, physical and behavioural health and wellbeing, in the context of people's individual circumstances.



Supporting nurses

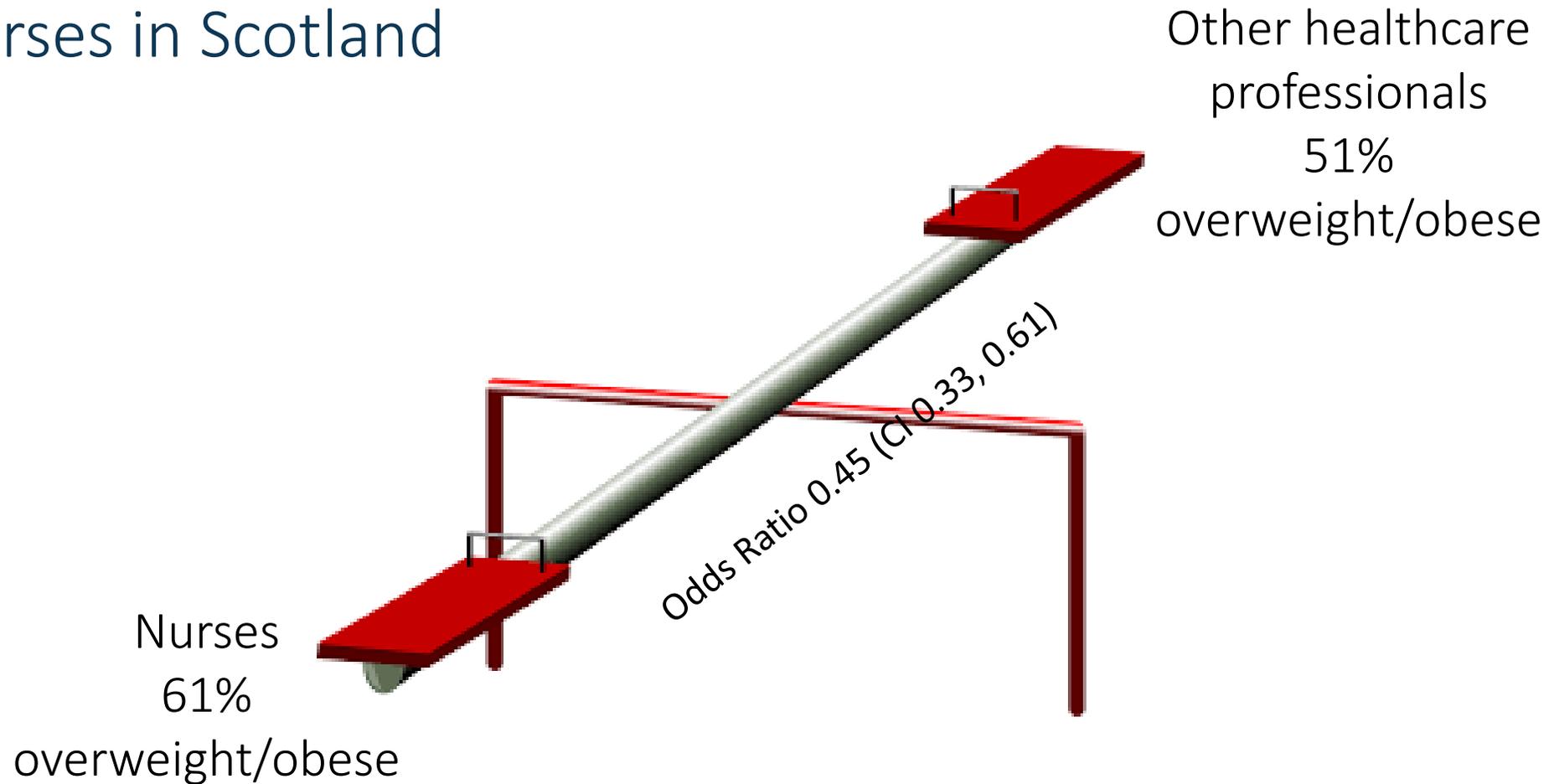


‘Some aspects of nurses’ health and wellbeing are below that of other health professionals and the general population. Some are living with physical health problems, working long hours with insufficient rest, eating an unbalanced diet and taking part in insufficient physical activity, consequently leading to overweight or obesity.’

Nurses with a healthier lifestyle engage more in promoting health to their patients

Evidence that patients have more confidence in the advice of nurses who appear to be healthy themselves

Overweight and obesity among nurses in Scotland



Objectives

1. To survey undergraduate nursing and AHP course leaders on coverage of cancer screening and prevention topics
2. To examine opportunities for training occupational health nurses in NHS worksites
3. To explore key opportunities for CPD training on cancer screening and prevention for nurses and AHP's
4. To evaluate the effect of training on current practice

Methodology

1. Online questionnaire survey of undergraduate nursing Course Leaders. Mostly closed questions with some opportunity for open text answers.
2. In depth telephone interviews with those respondents who agreed to be interviewed. Telephone interviews were recorded and transcribed anonymously. A thematic analysis was undertaken.

 Lifestyle and cancer risk teaching within your undergraduate Nursing or Allied Health Professional programme.

There is strong evidence that lifestyle choices are linked to chronic diseases such as cardiovascular disease, diabetes and many cancers.

Cancer incidence in Scotland is projected to rise by up to 33% by 2027 (from 2012) so cancer prevention is increasingly on the agenda of health professionals.

The aim of this questionnaire is to explore:

- the nature and extent of teaching undergraduate Nurses or Allied Health Professionals currently receive relating to lifestyle and cancer risk
- gaps in teaching/learning on lifestyle and cancer risk in undergraduate Nursing or AHP programmes
- interest in receiving additional teaching/learning resources on lifestyle and cancer risk

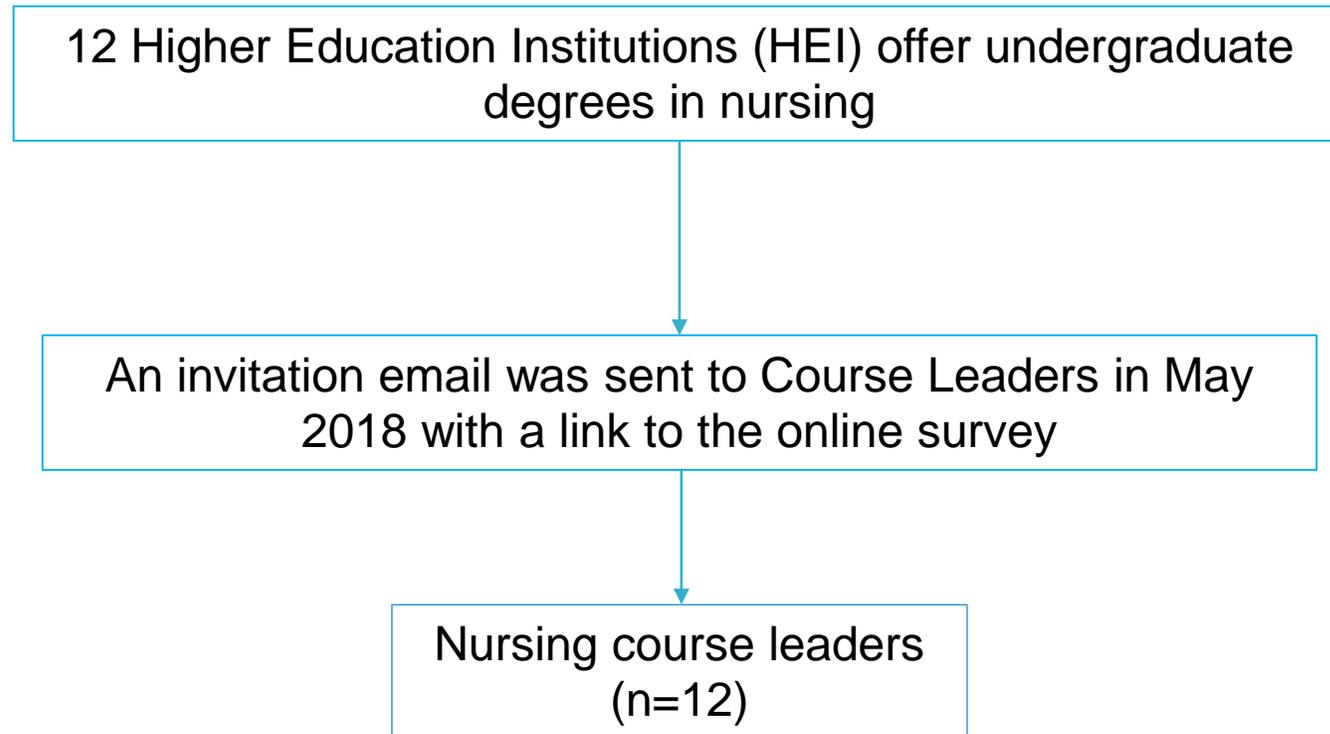
1. Your institution name is

2. Your department is

3. What is your role?

4. Which programme are you reporting on? (please complete one questionnaire per programme)

Response



Teaching/learning provided to students in the assessment of health behaviours

	ALL STUDENTS n(%)	SOME STUDENTS n(%)	NONE n(%)	DON'T KNOW n(%)
Measuring body weight	11(91.7)	1(8.3)	0(0.0)	0(0.0)
Calculating BMI	11(91.7)	1(8.3)	0(0.0)	0(0.0)
Assessing alcohol intake	10(83.3)	1(8.3)	1(8.3)	0(0.0)
Assessing dietary intake	10(83.3)	1(8.3)	0(0.0)	1(8.3)
Assessing physical activity levels	6(50.0)	2(16.7)	3(25.0)	1(8.3)

Does your programme aim to teach students how they can recognize harmful levels of health behaviours?

	YES n(%)	NO n(%)	DON'T KNOW n(%)
Unhealthy diet	11(91.7)	1(8.3)	0(0.0)
Alcohol consumption	11(91.7)	1(8.3)	0(0.0)
Physical inactivity	11(91.7)	0(0.0)	1(8.3)
Unhealthy bodyweight	11(91.7)	1(8.3)	0(0.0)

Topics covered in teaching/learning modifiable lifestyle cancer risk factors

TOPICS COVERED (OBESITY)	RESPONSES n=11
BMI categories	11(91.7)
Principles of weight management	8(66.7)
Portion sizes	6(50.0)
Energy dense foods	4(33.3)
Cancer risk	7(58.3)
How to avoid stigma	6(50.0)
Signpost to sources of support	8(66.7)

TOPICS COVERED (DIET)	RESPONSES n=10
5 a day	9(75.0)
Wholegrains	9(75.0)
Salt	9(75.0)
Sugar	9(75.0)
Consumption guidelines on red and processed meat	5(41.7)
Cancer risk	7(58.3)
How to avoid stigma	5(41.7)
Signpost to sources of support	8(66.7)

TOPICS COVERED (PHYSICAL ACTIVITY)	RESPONSES n=8
Classification of activity intensity	6(66.7)
Physical activity guidelines	7(58.3)
Sedentary behaviour	7(58.3)
Cancer risk	6(50.0)
How to avoid stigma	4(33.3)
Signpost to sources of support	7(58.3)

TOPICS COVERED (ALCOHOL)	RESPONSES n=11
Alcohol units	11(91.7)
Consumption guidelines	11(91.7)
Alcohol reduction	11(91.7)
Cancer risk	11(91.7)
Signpost to support	10(83.3)
How to avoid stigma	10(83.3)

Sources of information students signposted to

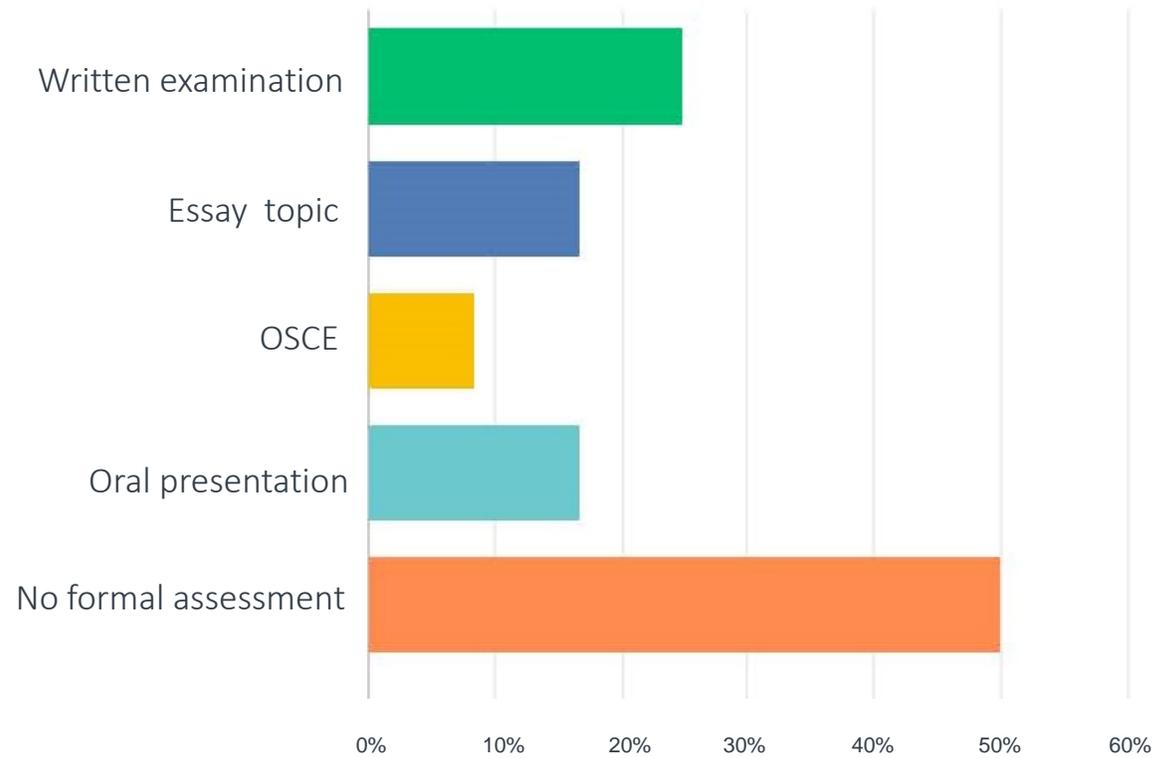


Training received in delivering a brief intervention on addressing harmful health behaviours

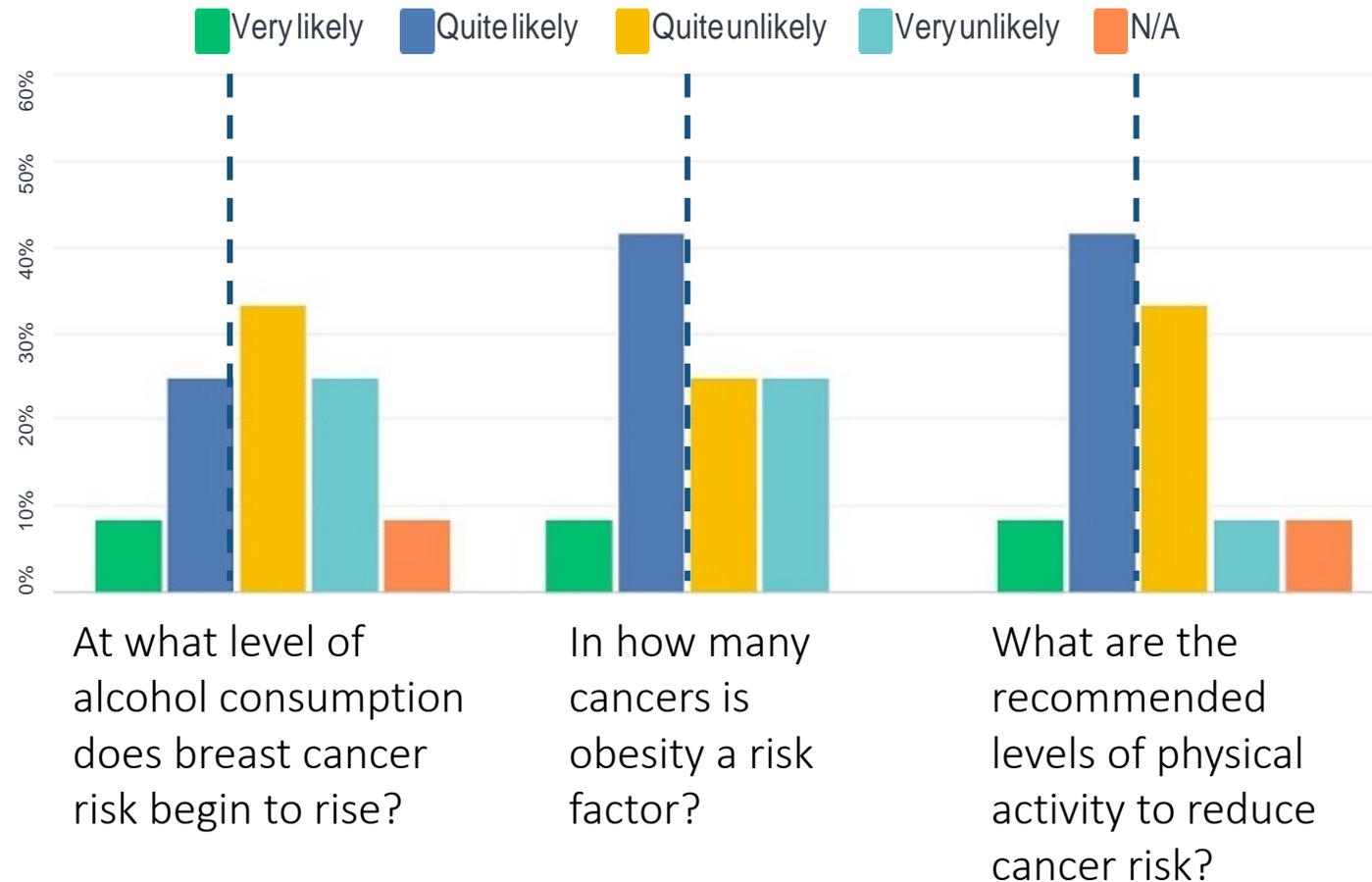
	NONE n(%)	A LITTLE n(%)	QUITE A LOT n(%)	IN GREAT DETAIL n(%)	DON'T KNOW n(%)
Smoking	2(16.7)	5(41.7)	4(33.3)	0(0.0)	1(8.3)
Unhealthy diet	2(16.7)	4(33.3)	4(33.3)	0(0.0)	2(16.7)
Weight management	2(16.7)	5(41.7)	3(25.0)	0(0.0)	2(16.7)
Physical inactivity	3(25.0)	2(16.7)	6(50.0)	0(0.0)	1(8.3)
Alcohol consumption	1(8.3)	4(33.3)	5(41.7)	1(8.3)	1(8.3)

90% of respondents reported students have the opportunity to deliver a brief intervention in roleplay/simulation (50.0%) and on placement (66.7%)

Methods of assessment



How likely is it your students would be able to answer the following questions?



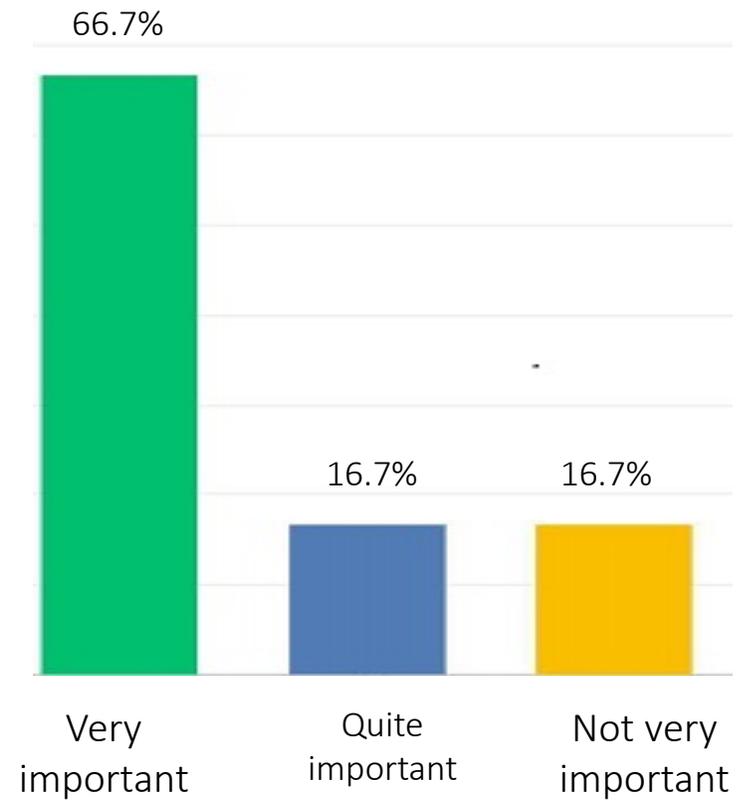
Teaching/learning on the national cancer screening programmes in the UK

Teaching/learning was reported on breast and bowel screening by 100% of courses and 83.3% for cervical screening

	BREAST n(%)	CERVICAL n(%)	BOWEL n(%)
Target population (gender, age range)	11(91.7)	10(100.0)	11(91.7)
Benefits of screening/ early detection	11(91.7)	10(100.0)	11(91.7)
Frequency of screening	10(83.3)	8(80.0)	10(83.3)
Where screening takes place	7(58.3)	6(60.0)	6(50.0)
What happens during the screening process	8(66.6)	7(70.0)	7(58.3)

Personal health behaviours

64% of respondents reported students' personal health behaviours and their impact on cancer risk are discussed as part of their programme?



Interview data – current curriculum

Broad brush stroke teaching/learning is frequently provided but not in detail

We need to equip students better to provide advice around obesity, cardiovascular health, screening, diet – the whole range of current priorities in terms of public health.

Obviously smoking and lung cancer but not sure about breast cancer and alcohol

It's an area we deal with at the moment but not as robustly as I think we should moving forward.

It's more general health promotion not necessarily linked to a disease.

They probably mention cancer can be a risk, but I don't know they focus on it.

Nursing was meant to go around being holistic. We forget the nitty gritty and why things happen. All those elements that help them then understand why they're giving the advice they're giving.

Signposting to sources of information and assessment of learning tend to be a little adhoc

We're expecting them to have knowledge above that of the general public but often they default to accessing information from cancer charities which have a reading age of 10 and they need to be more academic.

Tend to assess people on their understanding of policy and macro level stuff rather than how to have a conversation [about public health issues].

Interview data – personal health behaviours

Some great initiatives in place to support student health

There is a big pastoral input for the students. A bit of encouragement. We discuss walking and things like that. We used to run a walking class at lunchtime but due to work pressures we've not been able to continue.

'Why is there a group of chairs in the skills lab?' If you're in a ward area you don't get a seat so we removed them all. If you cannae stand for a 45 minute class you've got a problem going in to practice.

Over the last year we have been encouraging students to look at their own fitness levels and health behaviours. Make them aware they have to be physically fit to do their job.

We had a classroom full of part ones doing Baby Shark but it gets them up and moving.

For several years we have worked with the TA where they do physical activity and team building exercises to improve resilience.

Barriers to staff discussing personal health behaviours with students

It's [obesity] not something that is considered at selection. We're not allowed to discriminate against that.

I'm a little bit overweight so I would feel quite conscious maybe speaking about it. Well am I perfect?

My own position is probably a bit hesitant, but the data says about nurse's health, thinking about nutrition and stress it makes sense for us to talk about the health and wellbeing of individuals. We're having that conversation [as a department].

If we were to start saying to students we can't take you in because you don't meet certain lifestyle metrics we wouldn't meet our quotas and would be penalised [by SG].

There's a momentum building. Increasingly there is a willingness, but we lack the skills and knowledge to do it [counsel students].

Facilitators to staff discussing personal health behaviours with students

One of the things they [NMC] have emphasised far more is that nurses are expected to be role models. We take students who are not particularly good role models and the challenge will be for us to support those students to have a more healthy lifestyle and therefore be the role models we want them to be.

Where to put it in a busy curriculum? Can be a bit prescriptive.

New NMC guidance allows us more space to do that sort of thing and to address those issues in students as well.

It's an area we are very much looking to build on.

Conclusions

- Lifestyles relevant to cancer development are a part of the undergraduate nursing curriculum although not always badged as such
- More could be done to raise the academic standard and detail to which they are taught
- The new NMC standards are seen as a positive step towards achieving a more focused approach to teaching/learning
- Students personal health behaviours are increasingly on the agenda and there is a willingness to support students to improve their health and ability to carry out their challenging role

Thank you!

Acknowledgements:

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Undergraduate Nursing Course Leaders