



# Macmillan Primary Care Cancer Education Project, Cheshire and Merseyside

# Key findings of the PNs and HCAs survey conducted in Jan/Feb 2020

Many thanks for participating in the Macmillan Primary Care Cancer Education Project survey. At your request, we have summarised the findings and our next steps.

#### **Background**

Cancer remains a major cause of death according to the World Health Organisation (WHO) and will result in 12 million deaths by 2030 (WHO, 2011). According to the *Independent Cancer Taskforce report* (2015)<sup>1</sup>, all NHS staff who come into contact with cancer patients have a responsibility to ensure that every conversation they have with a patient delivers the information and support required. The report further indicated that all NHS Staff (including non-clinical staff) who have contact with people affected by cancer should have access to appropriate learning and development opportunities in order to provide adequate support and care to patients throughout their cancer journey.

More specifically to the training and education of the Primary Healthcare Workforce, Eike et al, 2011<sup>2</sup> in their study highlighted that primary healthcare professionals need to be supported in their roles by having access to clear and up-to-date information, and also, rapid access to specialists whenever this is required. Similarly, Health Education England's report -*Into the Future of Primary Care (2015)*<sup>3</sup> recognises the need for primary care workforce to have access to the right education and training to ensure they have regularly reviewed 'patient -centred' skills that enable a 'whole person' care approach. For primary care nurses (PCN/ PN), they need to be adequately informed and have the confidence and skills to discuss, the topic of cancer early diagnosis (McIlfatrick et al (2013)<sup>4</sup>; Skrobanski et al (2019)<sup>5</sup>.

In 2017, a survey on cancer care in primary care was conducted among primary care staff in Cheshire and Merseyside (C&M) and cancer education was highlighted as a key area to enable colleagues to provide optimal support for their patients.

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<sup>&</sup>lt;sup>1</sup> Independent Cancer Taskforce Report 2015

<sup>&</sup>lt;sup>2</sup> Eike et al. 2011: Views of cancer care reviews in primary care: a qualitative study

 $<sup>^{\</sup>rm 3}$  Health Education England: Into the future of primary Care 2015

<sup>&</sup>lt;sup>4</sup> McIlfatrick et al. 2013: Exploring the actual and potential role of the primary care nurse in the prevention of cancer: a mixed methods study

<sup>&</sup>lt;sup>5</sup> Skrobanski et al. 2019: Understanding primary care nurses' contribution to cancer early diagnosis: A systematic review

Furthermore, in line with the recently published *NHS long-term plan* (2019)<sup>6</sup> and its ambition to increase the proportion of cancers diagnosed at stages 1 and 2 from half to three-quarters by 2028, one of the key actions being developed locally (with CCGS, STPs, Cancer Alliances, HEE, Primary Care Networks) in achieving the ambition is the development of competency-based training and educational programmes for cancer teams and the health workforce across C&M.

Currently, cancer education to primary care staff across Cheshire and Merseyside is delivered in a variety of ways, with easier access in some areas more than others indicating the need for equal and consistent access to cancer education in the area.

The Macmillan Primary Care Cancer Education Project is being undertaken to explore the feasibility of setting up a Primary Care Cancer Education repository at The Clatterbridge Cancer Centre.

### Objectives of the survey

The PNs and HCAs survey assessed:

- Access to cancer education for the Primary Care Workforce;
- Barriers to accessing cancer education resources;
- Gaps in knowledge, awareness, skills and confidence of primary care workforce in the provision of care and support to cancer patients;
- Possible options to improve access to a more standardised, relevant and up to date cancer education resources for primary care workforce across Cheshire and Merseyside.

#### **Methods**

A web-based survey (generated via survey monkey) was disseminated to PCNs and Health Care Assistants (HCAs) in general practices across C&M. All registered practice nurses and health care assistants across Cheshire and Merseyside were considered as the study population to complete the survey. Practice Nurse Leads, Practice Managers, PCN Leads at each CCG, CRUK facilitators and Macmillan GP advisors across C&M assisted with survey dissemination. Survey responses were collected between 14<sup>th</sup> January and 28<sup>th</sup> February 2020. One hundred and forty-six (146) responses were obtained, however twenty- one (21) were excluded as they were not responses from practice nurses / HCAs. Therefore, responses of one hundred and twenty-five (125) participants were analysed.

#### **Data Analysis**

We performed descriptive analysis with variables described by numbers (counts) and proportions (percentages). Categorical variables were also expressed as counts and frequencies (percentages).

#### **Findings**

- 125 colleagues completed the survey across Cheshire and Merseyside.
- 74% of respondents work as Practice Nurses.
- Over half (60%) of the participants spend between 1 and 4 hours about cancer related topics (Fig. 1).

<sup>&</sup>lt;sup>6</sup> NHS Long term plan 2019

- The majority of participants had accessed 'other' resources not listed in the survey in the past 12 months for cancer education as well as the Royal College of Nursing, Macmillan and Nursing Times (Fig. 2).
- Barriers to access cancer education included time restraints, release from practice, lack of awareness to education available and its relevance to the role (including Line Manager's response to relevance).
- Most participants prefer face-to-face learning followed by online interactive learning (Fig 5).
- Participants mostly indicated that they obtain their information about cancer education through their
  CCGs.
- Assessment of gaps in PCNs cancer education revealed that about half of the participants were unsure of their knowledge/ confidence in the following (Fig. 4):
  - -Cancer aetiology, pathophysiology and epidemiology;
  - -Provision of health promotion information and support;
  - -Providing cancer specific support when patients are being reviewed;
  - -Range of tests / investigations in confirming cancer diagnosis;
  - -Referral pathways to cancer diagnosis & approaches to cancer diagnosis and staging;
  - -Providing cancer specific support when patients attend reviews;
  - -Signs and symptoms associated with acute treatment effects and possible recurrence
- The areas that colleagues suggested they would need support with education were **treatments** (including side effects), EOL/Palliative care, staging, signs & symptoms (including checker) while some indicated all aspects of cancer education.

Fig. 1 – Time spent on learning about cancer

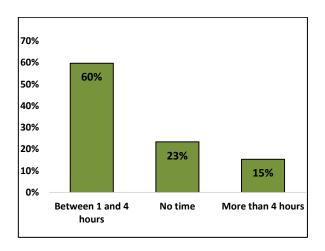


Fig.2 – Resources accessed over the past 12 month for cancer education

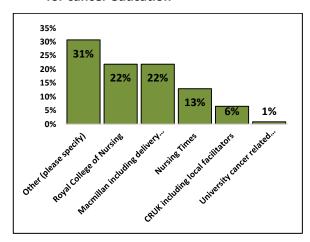


Fig. 3- Importance of cancer education to profession (On a scale of 0: *not important* to 10: *extremely Important*)

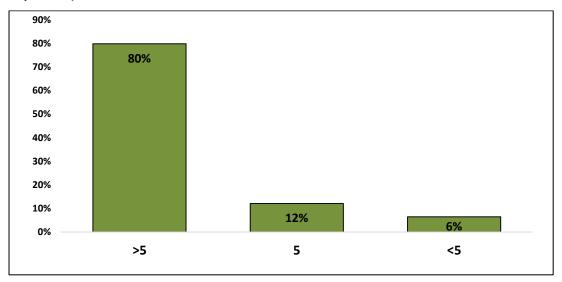


Fig. 4 –Gaps in cancer education

	I Agree	I Disagree	I am Unsure	
I understand the epidemiology of cancer	42%	16%	43%	
I am able to give health promotion information, support and				
advice on genetics and cancer	25%	29%	46%	
I am aware of my role and know the range of				
tests/investigations that may be required in confirming a				
diagnosis of cancer patients	46%	11%	43%	
I understand referral pathways to cancer services following				
NICE guidelines/local cancer-specific pathways	38%	18%	45%	
I understand the aetiology, biology and pathophysiology in the				
developement of cancer	22%	26%	52%	
I know and can describe approaches to the diagnosis and				
staging of cancer	18%	30%	52%	
16-1				
I feel confident when supporting a person affected by cancer				
with their pain and other common symptoms	25%	24%	51%	
I feel confident in acting as a key worker to undertake holisitic				
needs assessment for a person affected by cancer following				
their treatment, and providing advice relating to rehabilitation				
and survivorship.	19%	34%	47%	
I feel I am equipped to support people to self-manage their				
cancer and related symptoms.	18%	35%	47%	
I can recognise signs and symptoms associated with acute				
treatment effects and possible recurrence	29%	19%	52%	
I feel confident in providing cancer specific support when				
patients attend review	20%	31%	49%	
l understand and can advise on coping strategies and				
psychological therapies other than drugs to help people cope				
with their symptoms	23%	33%	44%	
I am confident supporting other professionals in helping				
patients through seamless transitions between the acute and				
home care, to survival programmes, palliative and end of care	19%	36%	45%	

Fig. 5 – Preferred method of learning

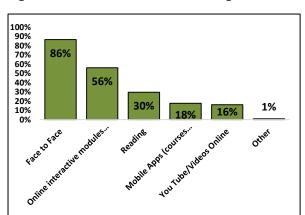


Fig. 6 – Provision of an online repository

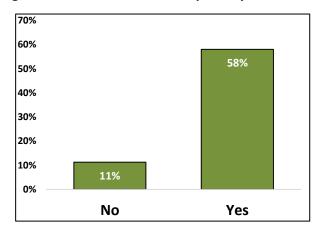


Fig. 7 – Word cloud below highlighting suggestions and ideas of participants on the online cancer education repository



#### Conclusion

While survey participants accessed cancer education via online resources, reading and attending face-to-face sessions, there was a clear expression of interest in the provision of an online cancer repository in Cheshire and Merseyside as indicated by 58% of the 125 PN/HCAs (Fig.6) that took part and 84% of the total (146 participants that completed the survey). Most participants commented that the cancer education online repository should be easy to read and simplified, be accessed in protected learning time, list training that is available in the locality footprint including face-to-face sessions, contain content for staff at all levels, signposting information for patients and their carers and have accessible support available for everyone (Fig.7).

#### **Next steps**

This practice nurse survey is the 2<sup>nd</sup> part of the series of primary care surveys conducted for this project-GPs/ ANPs and non-clinical staff surveys have also been undertaken. With Macmillan Cancer Support funding, the findings of the surveys will serve as evidence required for developing a strategy for setting up primary care cancer education repository at Clatterbridge Cancer Centre for easier access to cancer

education resources, coordination and delivery of cancer education and for advertising national and local education materials and information.

## The project team will:

- 1. Continue with scoping exercise and evidence gathering to inform decision-making on the provision of an online cancer education repository for Primary Care staff across C&M.
- 2. Compile a Primary Care Cancer Education Strategy for Cheshire and Merseyside.

# If you would like more information about the survey or are interested in supporting the project, please contact:

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