

# MIXED-METHODS EVALUATION OF AN EDUCATIONAL INTERVENTION FOR PROFESSIONALS DELIVERING CANCER CARE TO PARENTS WITH DEPENDENT CHILDREN AT END OF LIFE

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## Introduction

Families are often unsure how best to prepare children (<18 years) for the end of life experience of a parent with a poor cancer prognosis (McCaughan et al., 2021).

Children less prepared for the death of a parent are at greater risk of adverse outcomes (Høeg et al., 2021).

Health and social care professionals (professionals) are ideally placed to support families, as they prepare children for the death of a parent (Hanna et al., 2021).

Professionals consistently report a lack of knowledge and confidence on supporting parents at end of life, highlighting a need for training (Hanna et al., 2021).

## Aim of study

The aim of this study was to evaluate the effects of a face-to-face evidence-based and theory-driven educational intervention, to equip professionals, to deliver family-centred cancer supportive care when a parent with children (<18) is at end of life.

## The intervention

Evidence-based information on the impact of parental cancer from our team's empirical studies [ulster.ac.uk/fccc], co-produced educational videos, a communication framework and a bereaved parent's lived experience.

Fourteen, face-to-face, two-hour sessions delivered by two expert academic nurses (Dr. Hanna + Prof. Semple) between Sept 2021 and Sept 2023, for 347 professionals across five Healthcare Trusts in Northern Ireland.

## Methods

### Research design

Mixed-methods approach using Kirkpatrick's educational evaluation framework (1996):



Quantitative pre-test, post-test surveys immediately before and after the intervention using a validated self-efficacy scale (Axboe, 2016), and single-item questions.



Qualitative interviews ≥ 3-months post-intervention, to explore perceived impact of intervention on practice.

**Research participants** - 216 professionals completed both pre-test and post-test survey.

Fourteen professionals were interviewed between 3-and-19-months post-intervention (mAvg = 9-months).

### Research data analysis

Quantitative data was analysed using descriptive and inferential statistics.

Qualitative data was analysed using reflexive thematic analysis (Braun & Clarke, 2019).

## Results

### Quantitative findings

Professionals reported the intervention increased their knowledge and was detailed enough to meet their training needs (mean = 4.56; max 5; std dev = .60).

### Measurement of self-efficacy

Pre-intervention findings highlighted participants reported a low score regarding their perceived self-efficacy to communicate with parents concerning their children (mean = 45.68; max 120). After the intervention, the mean score increased to 96.86. One-way repeated measures ANOVA identified a statistically significant improvement in professionals' self-efficacy after the intervention ( $p < .001$ ) (see Figure 1).

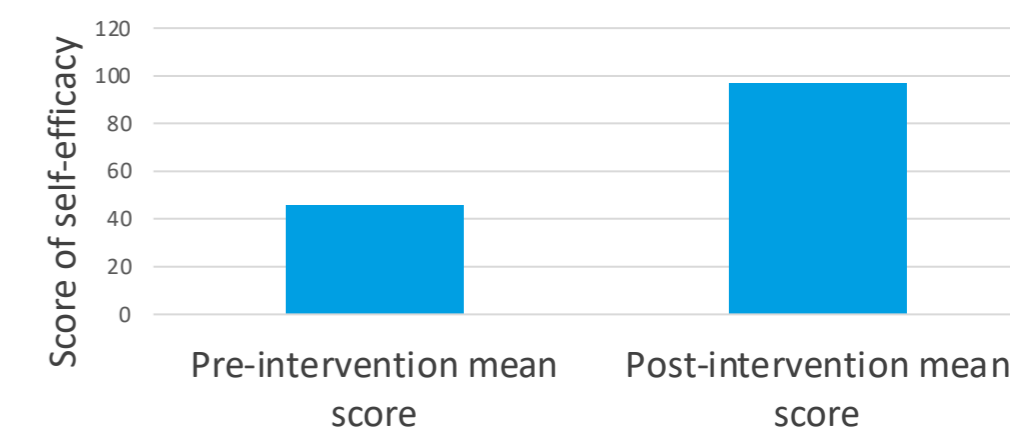


Figure 1: Mean scores of self-efficacy before and after the intervention.

### Qualitative findings (n = 14)

- Professionals gained new approaches and tools to progress cancer conversations with parents.
- Professionals reported increased confidence to reassure parents of the importance of including and involving their children in the end of life experience.
- It was considered necessary for all professionals to have access to this training, to promote the provision of family-centred cancer care in practice.

## Conclusion

Currently, there is a lack of educational interventions to equip professionals to support parents at end of life (Sheehan et al., 2023). This intervention appeared to promote professionals' knowledge and confidence in the provision of family-centred cancer care at end of life.

## References

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