

**Sarah Ellery**

**Canterbury**

District Health Board

Te Poari Hauora o Waitaha



# Factors affecting pre-chemotherapy patient education

## 4 Questions

- What factors affect pre-chemotherapy education?
- Is there evidence/best practice to guide how it should be delivered?
- What are most commonly used methods or resources for delivery?
- Is there evidence/best practice which identifies content of pre-chemotherapy education?

# Our Approach

- Nurse delivered, one on one
- Chemotherapy education checklist/Mosaiq
- Covers safety info, contact details, how chemo administered, side effects, resources, cultural requirements

# Background literature review

- Move from paternalism to partnership
- Integral part of health care and informed consent
- Provide control, ability to cope and self care, improve outcomes
- Many factors affect health education
  - Methods and resources
  - Quality
  - Timing
  - Content
  - Environment
  - Coping theory
  - Adult learning theory

# Background Patient Issues

- Needs and preferences
- Preferred sources
- HISB
- Learning styles
- Satisfaction
- Communication
- Impact of culture, age, sex, education, socioeconomic status, health literacy, special populations

# Background Health System Issues

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- Short in patient stays/Outpatient delivery of care
- Staff shortages
- Insufficient and poor quality resources
- Time
- Multilingual resources
- Lack of health literacy
- Lack of HP training in adult learning theory, communication
- Technology

# The Integrative Review

- Inclusion criteria – all literature in English regardless of age
- Appraised for discussion of:
  - Education content, delivery by HP, any delivery format, use of methods/resources, delivery environment
- Before the start of chemotherapy treatment.
  - Education interventions undertaken with any other aim e.g. symptom control were excluded.
- 13 studies/2 articles
  - RCT/pseudo randomised = 6
  - Quasi-experimental = 3
  - Descriptive = 4
  - Opinion = 2

JBI tools for eligibility, critical appraisal, data extraction used

# Findings

- Delivery similar, combinations
- Written and multimedia supplemental to verbal
- Environment underexplored – privacy issues
- Little comment of content being evidence based
- Staff training needs attention
- Timing affects education
- Timing linked to memory and recall, ? Anxiety and readiness to learn
- No consensus on time taken
- Lack of structure, variability amongst staff in delivery



# Findings

- Resources to meet all needs, sensory, procedural and temporal approach, quality, health literacy, level of resource,
- Lack of studies on wider technology use (consider se status, special populations)
- Consider age, ? Culture, coping style
- Recall
- Family needs

# 4 Questions Answered

- What factors affect pre-chemotherapy education?
- Is there evidence/best practice to guide how it should be delivered?
- What are most commonly used methods or resources for delivery?
- Is there evidence/best practice which identifies content of pre-chemotherapy education?
- Numerous factors affect pre-chemo education
- Principles of adult learning and coping theory exist to guide best practice in delivery
- Evidence exists on delivery methods resources but you need to consider all the factors affecting education for every person
- Most commonly used methods/resources identified
- ? Underlying assumption that evidence best practice used to inform content, not explicit in literature

# My Reward !

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# References

- Ministry of Health. (2010a). *Guidance for improving supportive care for adults with cancer in New Zealand*. Wellington, New Zealand: Author.
- Ministry of Health. (2012b). *Rauemi Atawhai: a guide to developing health education resources in New Zealand*. Wellington, New Zealand: Author.