Mixed-methods evaluation of a face-to-face educational intervention for health and social care professionals to deliver family-centred cancer supportive care when a parent with dependent children is at end of life

Prof. Cherith Semple, Lisa Strutt & Dr. Jeff Hanna

c.semple@ulster.ac.uk

@semple_cherith
BACKGROUND

‘Don’t forget the children’

(Childhood Bereavement Network, 2023)

Familial challenges and needs

(Hanna et al., 2019; McCaughan et al., 2021; Semple et al., 2021)

The role of health and social care professionals

(Dalton et al., 2022; Franklin et al., 2019; Hanna et al., 2021)
AIMS and OBJECTIVES

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

Objectives:
(1) to determine if the intervention improved professionals’ knowledge about the support needs of families at end of life.
(2) to determine if the intervention improved professionals’ self-efficacy toward supporting parents at end of life.
(3) to explore the perceived impact of the intervention on professionals’ practice toward supporting parents at end of life with children (<18).
THE INTERVENTION

Duration

Evidence-based
THE INTERVENTION

Evidence-based

Systematic review

Qualitative study with 79 participants

(1) Parents at end of life (n = 3)
(2) Bereaved parents (n = 21)
(3) Health & social care professionals (n = 32)
(4) Funeral directors (n = 23)
**THE INTERVENTION**

Framework

---

**Family resilience: a framework for clinical practice**

Froma Walsh

Affiliations — collapse

**Affiliation**

1 School of Social Service, Administration and Department of Psychiatry, and Center for Family Health, University of Chicago, USA. fwalsh@uchicago.edu
THE INTERVENTION

Educational videos
THE INTERVENTION

Duration

Evidence-base

Framework

Educational videos

Bereaved parent

Facilitators
THE INTERVENTION

14 sessions

Sept 21 – Sept 23

347 professionals trained
RESEARCH DESIGN

**Kirkpatrick’s (1994) four levels of evaluation**

- **Level 4 Results**: What benefits has the organization experienced as a result of the training?
- **Level 3 Behavior**: Have participants applied what they learned from the training?
- **Level 2 Learning**: How much did participants learn from the training and have their skills improved?
- **Level 1 Reaction**: How did participants respond to the training?

**Mixed-methods approach**

**Quantitative**
- Pre-test, post-test
  - Pre-survey (n = 274)
  - Post-survey (n = 239)
  - Pre + post-survey (n = 216)
- Validated self-efficacy scale
- Single item questions

**Qualitative - 14**
- Interviews ≥ 3 months
  - Between 3-and-19-months post intervention
  - (mAvg = 9-months)
**KEY FINDINGS**

**Kirkpatrick’s Level 1: Reaction**

<table>
<thead>
<tr>
<th>Question</th>
<th>Mean</th>
<th>Std. dev</th>
</tr>
</thead>
<tbody>
<tr>
<td>‘The workshop objectives were clear’ (n = 239).</td>
<td>4.66</td>
<td>.82</td>
</tr>
<tr>
<td>‘The workshop was delivered at a suitable place’ (n = 239).</td>
<td>4.67</td>
<td>.78</td>
</tr>
<tr>
<td>‘The course content was relevant to my practice’ (n = 239).</td>
<td>4.58</td>
<td>.84</td>
</tr>
<tr>
<td>‘I would recommend this training workshop to a colleague working on cancer care’ (n = 239).</td>
<td>4.80</td>
<td>.55</td>
</tr>
</tbody>
</table>

This was excellent training. The thought behind it, the videos, the simplicity of the information which needed to be shared, and the detailed process was fantastic. The training should be shared with all professionals. What a brilliant and meaningful PhD. Trainers were excellent too.
### KEY FINDINGS

#### Kirkpatrick’s Level 2: Learning

<table>
<thead>
<tr>
<th>Question</th>
<th>Mean</th>
<th>Std. dev</th>
</tr>
</thead>
<tbody>
<tr>
<td>‘The course content <strong>increased</strong> my knowledge level’ (n = 239).</td>
<td>4.65</td>
<td>.77</td>
</tr>
<tr>
<td>‘The course content was <strong>detailed</strong> enough to meet my training needs’ (n = 239).</td>
<td>4.56</td>
<td>.60</td>
</tr>
</tbody>
</table>

---

**Measurement of self-efficacy**

One-way ANOVA = p<.001
KEY FINDINGS

Kirkpatrick’s Level 3: Behaviour

Theme 1: Impact of the intervention on practice: power of art, science and lived experience

It's been ten months, but the memory of those videos has stuck with me. I’ve watched them a few times since. In fact, I had a mum who was in the dying phase a few weeks ago, and I re-watched that video just to remind myself of what it is I needed to tell dad. The videos are so impactful and poignant, and very reflective of what we are seeing in practice. They are so well done.

Lisa’s story was so raw and yet so real. Lisa really had to pick up the pieces, and had to find out a lot of support for herself. And that’s not right. I’ve no doubt there’s plenty of parents out there like Lisa. Hearing the real-life example makes you want to change your practice and make things better for future parents.
KEY FINDINGS

Kirkpatrick’s Level 3: Behaviour

Theme 2: Promoting family-centred cancer care in practice

Advanced communication skills

Ongoing training

Aligned practice
Conclusion

Clear need for **sustainable model of training** for HSCPs in this challenging area of clinical practice

- eLearning
- Advanced communication skills training

**Future research** to evaluate Kirkpatrick’s level 4 – impact of training for families when a parent is at end of life

**Policy change** to ensure parents at end of life with dependent children receive necessary supportive cancer care
NEW eLEARNING RESOURCE

Family Centred Cancer Care: Supporting End of Life Conversations

ACKNOWLEDGEMENTS

Western Health and Social Care Trust

Belfast Health and Social Care Trust

Northern Health and Social Care Trust

Southern Health and Social Care Trust

South Eastern Health and Social Care Trust

Ulster University

South Eastern Health and Social Care Trust

THANK YOU!
THANK YOU + QUESTIONS


Prof. Cherith Semple

c.semple@ulster.ac.uk

@semple_cherith