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Impact of an Intensive Nursing Education Course on Nurses' Knowledge, Confidence, Attitudes, and Perceived Skills in the Care of Patients With Cancer

Suzanne K. Steginga, RN, PhD, Jeffrey Dunn, PhD, Anne Marie Dewar, RN, Alexandra McCarthy, RN, BN, MN, MRCN, Patsy Yates, RN, PhD, and Geoff Beadle, MBBS, FRACP, CR

Purpose/Objectives: To evaluate the impact of a cancer nursing education course on RNs.

Design: Quasi-experimental, longitudinal, pretest/post-test design, with a follow-up assessment six weeks after the completion of the nursing education course.

Setting: Urban, nongovernment, cancer control agency in Australia. Sample: 53 RNs, of whom 93% were female, with a mean age of 44.6 years and a mean of 16.8 years of experience in nursing; 86% of the nurses resided and worked in regional areas outside of the state capital.

Methods: Scales included the Intervention With Psychosocial Needs: Perceived Importance and Skill Level Scale, Palliative Care Quiz for Nurses, Breast Cancer Knowledge, Preparedness for Cancer Nursing, and Satisfaction With Learning. Data were analyzed using multiple analysis of variance and paired t tests.

Main Research Variables: Cancer nursing-related knowledge, preparedness for cancer nursing, and attitudes toward and perceived skills in the psychosocial care of patients with cancer and their families.

Findings: Compared to nurses in the control group, nurses who attended the nursing education course improved in their cancer nursing-related knowledge, preparedness for cancer nursing, and attitudes toward and perceived skills in the psychosocial care of patients with cancer and their families. Improvements were evident at course completion and were maintained at the six-week follow-up assessment.

Conclusions: The nursing education course was effective in improving nurses' scores on all outcome variables.

Implications for Nursing: Continuing nursing education courses that use intensive mode timetabling, small group learning, and a mix of teaching methods, including didactic and interactive approaches and clinical placements, are effective and have the potential to improve nursing practice in oncology.

eople with cancer and their families experience a range of distressing sequelae at diagnosis and through the experience of cancer treatment, recovery and rehabilitation, or recurrence. In addition to the physical effects that result from cancer treatments, patients may experience psychological symptoms of depression and anxiety, fears about cancer recurrence and uncertainty about the future, changes in self-image and interpersonal relationships, and feelings of social isolation (Andersen, 1993; Dunn & Steginga, 2000; Steginga, Occhipinti, Wilson, & Dunn, 1998). Consequently, patients and

Key Points...

- Nurses play a key role in the provision of psychosocial support to patients and families.
- ➤ Intensive nursing education is effective in increasing nurses' knowledge, preparedness for cancer nursing, and attitudes toward and perceived skills in psychosocial care.
- ➤ Intensive mode timetabling educational programs with small group learning are responsive to the learning needs of regional and rural nurses working in cancer care.

their families need heightened psychosocial support from their healthcare team during the cancer experience. Patients often report inadequate support. For example, breast cancer survivors have reported that their needs for psychosocial support and for help with coping were not being met adequately (Thewes, Butow, Girgis, & Pendlebury, 2004). Additionally, studies of men with prostate cancer, patients undergoing chemotherapy and radiation therapy, and heterogeneous cancer populations have reported unmet needs for psychological and informational support (Girgis, Boyes, Sanson-Fisher, & Burrows, 2000; Newell, Sanson-Fisher, Girgis, & Ackland, 1999; Sanson-Fisher et al., 2000; Steginga et al., 2001). Given such findings, interventions to enable healthcare professionals to better meet patients' psychosocial needs are a priority.

Suzanne K. Steginga, RN, PhD, is director of community services at the Queensland Cancer Fund; Jeffrey Dunn, PhD, is executive director of the Queensland Cancer Fund and an associate professor in the School of Population Health and adjunct professor in the School of Social Science at the University of Queensland; Anne Marie Dewar, RN, is cancer support coordinator of the Queensland Cancer Fund; Alexandra McCarthy, RN, BN, MN, MRCN, is a lecturer in the School of Nursing at Griffith University; Patsy Yates, RN, PhD, is an associate professor of nursing in the School of Nursing at the Queensland University of Technology; and Geoff Beadle, MBBS, FRACP, CR, is a medical oncologist at the Queensland Institute of Medical Research, all in Brisbane, Queensland, Australia. (Submitted September 2003. Accepted for publication June 15, 2004.)

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