Using a ‘Train the Trainer’ model to inform people with a learning disability of good bowel health and bowel cancer screening

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Introduction

The ‘Good bowel health and bowel screening’ Train the Trainer programme was developed to educate trainers to cascade a programme of information about bowel health and bowel cancer screening to health professionals, carers, families and people with learning disabilities.

The programme aimed to:

- Equip people with the knowledge and skills to train others
- Support people with a learning disability
- Increase understanding of the importance of good bowel health and bowel cancer screening
- Improve bowel screening uptake

The project was developed through a partnership between the North East and Cumbria Learning Disability Network, Bowel Cancer UK and additional experts, including people with learning disabilities.

Background

People with a learning disability generally have poorer health and are more likely to die at a younger age than the general population. People with a learning disability are less likely to take part in cancer screening and rates of gastrointestinal cancers are higher in this population. Bowel cancer screening aims to detect bowel cancer at an early stage, when treatment has the best chance of working.

Method

The North East and Cumbria Learning Disability Network worked in partnership with Bowel Cancer UK to develop the ‘Good bowel health and bowel screening’ Train the Trainer programme and resource pack.

A resource pack to support the delivery of training has been developed and shared with all trainees. This includes presentations and activities to support the cascade of training, a carers guide about the bowel cancer screening programme and two easy read booklets.

Training the trainers

Four courses were delivered across the North East and Cumbria. A total of 66 people were trained. These included community learning disability nurses, bowel screening centre and hub staff, care providers, Macmillan community nurses, third sector staff, and local authority health improvement and public health staff.

The course was well received and showed an increase in understanding from all participants and confidence delivering cascade training with the resources provided.

‘Very informative, interesting course which was delivered in a professional and interactive way. Resources shared will be able to help me deliver course to patients, colleagues, thank you.’

‘A good interactive day and good resources. I feel confident in going to deliver to others.’

Results

Cascade of information

The first course which was attended by 21 people was evaluated after three months by an online survey. This showed that after the training, a further 268 people had information cascaded to them. If we equate this to the 66 trainers trained in full over the project we can estimate approximately 1263 people have had information cascaded to them within the first three months.

Future developments

Follow up of trainees will continue until three months after the last training (early February 2017). A full report will then be collated and presented to funders. The project model of working collaboratively and in a participatory approach works, and could be transferred to other services. The sustainability of the model relies on ongoing funding being provided for the production and printing of the resource pack. Bowel Cancer UK is working with NHS Health Scotland to develop a region-specific resource and training programme. Uptake of screening in the North East will be monitored on a longer-term basis.

Figure 1. Average score given by attendees for each question (scale: 0–5 where 0 = not at all confident/knowledgeable, and 5 = very confident/knowledgeable).

Figure 2. Number of people trainees had cascaded the messages to in the three months following the training day.

References
2. Confidential Inquiry into premature deaths of people with learning disabilities. http://www.bris.ac.uk/cipold/

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