Preferences and Barriers of Healthcare Providers in Cancer Clinical Care Practices:

Exercise Counseling and Referral

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Background

Know/Do Gap: Literature

- Known benefit of exercise for cancer survivors\textsuperscript{1}
- **Lack of exercise reported by cancer survivors**\textsuperscript{2,3}
  - 20\% of cancer survivors had received education on the importance of exercise\textsuperscript{4}
  - Identified lack of exercise counseling and referral\textsuperscript{5,6}
Alberta Cancer Exercise (ACE) 5-Year Hybrid Effective-Implementation Study

- N = 1000 patients, all tumor types
- Standardized, cancer-specific, community-based exercise
- 12-week, bi-weekly
- Improved health and physical fitness outcomes for survivors

*Exercise into cancer care continuum*
Purpose

To determine Healthcare Provider:

▸ Preferences, barriers and facilitators towards exercise counseling and referral of cancer survivors

▸ ‘Actionable’ Implementation strategies
Methodology

- **Electronic Questionnaire**
  - Aug 2017 - Oct 2017
  - N = 47

- **Focus Group: Probe**
  - May 2018
  - N = 7

- **Data Analysis**
Methodology

- Question development based on the Theoretical Domains Framework

- Data Analysis: mapping to the Capability, Opportunity, Motivation Behavior Change (COM-B) Model
## Exercise Counseling Practices

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
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| Do you see exercise counseling of patients with cancer as a component of care that fits within your professional role/ scope of practice? | - Not at all  
- A little bit  
- Somewhat  
- Quite a bit  
- Very much |
| To the best of your knowledge, who would you consider responsible for counseling patients regarding exercise? |                                                                 |
| Other than yourself, who else you see responsible for counseling patients regarding exercise? |                                                                 |
| Is exercise counseling for patients with cancer something you consciously do in the clinic? | - Never  
- Rarely (once per month or less)  
- Occasionally (once per week OR if asked by patient)  
- Often (two to four times per week)  
- Very often (daily) |
Healthcare Provider Disciplines N = 47

- Nurse: 30.4%
- Supportive Care: 41.3%
- Oncologist: 28.3%

**Physiotherapist**
Radiation Therapist
Social Worker
Nutritionist
Occupational Therapist
Psychologist
Speech Language Pathologist
Results

72% HCPs “not at all” to “somewhat” confident in exercise counseling

17% HCPs daily exercise counseling

98% exercise counseling should occur at multiple time points
Results

Barriers:
- Time in-clinic
- Lack of knowledge regarding appropriate exercise

Preferences/ Facilitator:
- ‘Interdisciplinary team’

Actionable Implementation Strategies: Capabilities/ Opportunities

- Evidence
- Exercise Screening/
- In-Clinic Patient Education
- Community Programming
Conclusion

- Facilitate efficient and *appropriate* exercise counseling referrals (PT vs. community exercise)
- HCP perspective to guide future strategies

*Improve patient care & access to exercise*
References

3. Boyle, T., Vallance, J. K., Ransom, E. K., & Lynch, B. M. (2016). How sedentary and physically active are breast cancer survivors, and which population subgroups have higher or lower levels of these behaviors? Supportive Care in Cancer, 24(5), 2181–2190.

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Thank you!

Questions?

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https://www.albertacancerexercise.com/