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Nurse delivery of ABIs in primary care: Evidence, Practice, Challenges and Solutions

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Overview

- Evidence
- Challenges
- Nurses Role
- Solutions



Responding to alcohol-related harm

- Nurses are largest group of health care professionals - over 670,000 (NMC, 2015)
- Nurses from all fields of practice, are well placed to identify patients' levels of alcohol consumption, offering advice in relation to reducing levels of alcohol consumption (Watson et al 2010)
- Delivering brief interventions where necessary (Nkowane & Saxena. 2004; Murray & Li 2007; Holloway et al. 2007; Littlejohn & Holloway 2008)
- Nurses are not engaging with this important role (Tsai et al 2010)



Empirical evidence

- Typically nurses receive little education and training about alcohol issues (Lock, Kaner, Lamont and Bond, 2002).
- The alcohol component of the curriculum for nurses lags behind (Rassool & Rawaf 2008, Holloway & Webster, 2013).
- Lack of confidence and experience can allow a nurse to feel anxious about their role (Lock *et al.*, 2002; Holloway et al, 2014).
- Low Therapeutic Commitment – role support, role legitimacy, role adequacy (Shaw, 1978)
- Alcohol education within curriculum improves student nurses attitudes and knowledge (Arthur, 2001)



Context

- Alcohol-related knowledge weak
- Lower reported clinical confidence in patient-centred care items e.g. identifying and assessing patients drinking behaviour and adapting nursing interventions
- Higher reported clinical confidence in recognising, explaining and describing relationships between alcohol-related conditions e.g. alcohol-related conditions, pharmacology and tasks that did not involve a patient

Lawrence & Holloway (2005); Flynn & Holloway (2008); Holloway & Webster (2013)



Catalyst for Change: NMC review of pre-registration education

- Generic competencies – all nursing students
- Field specific competencies – adult, child, mental health, learning disability
- Competencies organised under 4 Domains
- Each Domain sets out an overall standard of competence
- Essential Skills Clusters



Domain – Communication and Interpersonal Skills

- Point 6
 - “Identifies opportunities for health promotion and health education activities”



Essential Skill Cluster (ESC)

- ESC 9
 - Make a holistic systematic assessment of their needs and develop a comprehensive plan of nursing care that is in their best interests and which promotes their health and well-being and minimises the risk of harm



Progression point 1

- **Contributes** to the **assessment** of physical, emotional, psychological, social, cultural & spiritual needs, including **risk factors** by identifying, recording, sharing and responding to clear indicators and signs
- **Understands** the concept of public health and the benefits of a healthy lifestyle and the **potential risk factors** involved with various **lifestyles or behaviours**
- **Recognises the indicators of unhealthy lifestyles**



Entry to Register

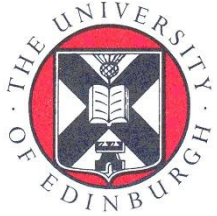
- (xxv) Works within a public health framework to **assess needs** and **plan care for individuals, communities and populations**
- (xx) Discusses sensitive issues in relation to public health and **provides appropriate advice and guidance e.g. contraception, substance misuse, impact of lifestyle on health**



Implementation Framework

Workforce development:

- education & training (Roche, 1998)
- supervision (Kavanagh et al, 2002)
- partnerships (Wilkinson et al, 2002)
- leadership (de Crespigny, 2003)
- active dissemination of research findings (de Crespigny, 2003)



Education & Training

- Delivery of Alcohol brief interventions: A competency

Framework [http://www.nes.scot.nhs.uk/media/3125/Delivery of Alcohol brief Interventions spring 2010.pdf](http://www.nes.scot.nhs.uk/media/3125/Delivery_of_Alcohol_brief_Interventions_spring_2010.pdf)

- NHS Health Scotland

<http://elearning.healthscotland.com/course/index.php?categoryid=108>



Supervision & Partnership

Health Promotion Team NHS Lothian

<http://www.nhslothian.scot.nhs.uk/HealthInformation/RecoveryInLothian/Training/AlcoholBriefInterventionsPoster.pdf>



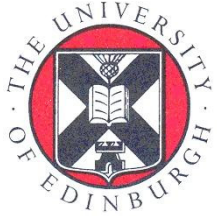
Leadership

- Joint approach
- Practitioners, Clinicians, Academics, Researchers, Policy Makers, 3rd Sector, NGOs
- Professional bodies



Active Dissemination of Research Findings

- Scottish Alcohol Research Network (SARN)
www.sarn@ed.ac.uk
- Scottish Health Action on Alcohol Problems (SHAAP) www.shaap.org.uk
- International Network on Brief Interventions for Alcohol & Other Drugs (INEBRIA)
www.inebria.net
- UK Centre for Alcohol & Tobacco Studies (UKCTAS) www.ukctas.ac.uk/ukctas/index.aspx



Guidance

Brief Intervention For Hazardous and Harmful Drinking: A Manual for Use in Primary Care
(Babor and Higgins-Biddle, 2001)

PH24 Alcohol-use disorders: preventing harmful drinking (NICE, 2010)

Alcohol related harm in the practice. *Journal of Practice Nursing*, Vol.26, No.1 (Holloway, 2015)



Thank You!

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