Developing a European-wide smoking cessation e-learning tool for healthcare professionals

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INTRODUCTION
- Smoking is one of the leading preventable causes of premature death and preventable disease.
- In Europe, 29% of individuals over 15 years of age identify as smokers.
- Some countries within Europe have alarmingly high rates of tobacco use; 40% of Greek adults smoke regularly.
- Smoking and chewing tobacco are directly related to premature death and preventable disease.

AIMS
- We aim to provide an e-learning tool, promoting smoking cessation advice, accessible to EU healthcare professionals.
- The resource will be translated into 8 languages.
- Increase the skillset of users and provide an online certificate for those that complete an online assessment.
- Reduce healthcare cost and increase length and quality of life for EU residents.

WHY AN ONLINE RESOURCE?
- Modern education faces challenges through rapidly advancing knowledge base & methods of distribution.
- Development of equivalent ‘new knowledge’ was 50 years in 1950.
- This reduced to 3.5 years in 2010.
- It is projected to be 3.5 years in 2010.
- Small financial outlay leading to a comparatively large economic benefit.
- Material is an ‘open educational resource’ (OER), maximising access.
- Increasing acceptance of, engagement in and success with online learning.
- Modern learners in healthcare would rather utilise an online resource than a textbook.
- Evidence to suggest that educational outcomes are improved when utilising an interactive resource.
- A website is cheap and comparatively easy to update.

METHOD

To increase knowledge of the resource:
- Development of smoking cessation document with current policy for every country.
- Dissemination of e-learning tool at conferences via poster and oral presentations.
- Publication of peer-reviewed documents in widely accessed journals. Topics include:
  - Smoking cessation for dental and healthcare practitioners.
  - An evaluation of smoking cessation advice currently available online.
  - A meta-analysis of current meta-analyses on effectiveness of smoking cessation modalities.
- A one day presentation in each partner country for undergraduates, postgraduates, dental and healthcare academics.
- Provision of resource to Universities.

IMPLEMENTATION

- Phase 1 - A consensus document will be formulated regarding smoking and effectiveness of smoking cessation modalities.
- Phase 2 - The document will be circulated to external experts for evaluation.
- Phase 3 - ‘Soft launch’, of website, alongside feedback from healthcare practitioners (n=25) on (a) content (b) appropriateness (c) user friendliness (d) navigation (e) time spent.
- Revision of website.
- Phase 4 - Website content appraised by external expert. Activation of social media accounts.
- Phase 5 – Dissemination and assessment of outcomes.

REFERENCES

PREDICTED OUTCOMES
- Educational Impact – Implementable smoking cessation advice for 8 different EU countries.
- Economic Impact – A potential for reduced healthcare cost and economic gain through reduced loss of working hours.
- EU Interrelation Impact - Consolidate and establish new partnerships for future research alongside sharing opinions and education strategy.
- Health Impact - Quitting at 25 to 34, 35 to 44, or 45 to 54 years of age gained around 10, 9, and 6 years of life respectively, compared with smokers.
- These outcomes will be assessed in three ways:
  - By the external evaluators of the project.
  - From feedback in Phase 3 from healthcare practitioners regarding the website content.
  - Survey following Phase 5 to ascertain if there has been any change in practice after using our online resource.

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OUTPUT EXAMPLES

Fig. 1 A proposed flow chart based on the 3A’s (Ask, Advise, Act), demonstrating how practitioners can discuss cessation with smokers.

Fig. 2 A chart to show suggested dosages of nicotine replacement therapies depending on dependence. Adapted from Government of Western Australia Department of Health Guidance.

Fig. 3 The 5 stages of change, with techniques for healthcare providers to interact with patients who smoke.

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