

Transforming Care After Treatment in Forth Valley

November 2017



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YOUR
CANCER CARE

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A new approach to supporting people after cancer treatment has been tested successfully in Forth Valley.

The project, part of the Transforming Care After Treatment programme, offered a selected group of men who had finished treatment for prostate cancer, an assessment of their support needs, alongside help dealing with their emotional, financial and practical needs. The project's person-centred care approach shows how the vision for cancer care set out in the Scottish Government's cancer strategy can be delivered in practice. It also shows how key elements of Macmillan's "Recovery Package", particularly the Holistic Needs Assessment, can be used by the NHS to support people with cancer.

The aims of the project were:

- to support men previously diagnosed with prostate cancer to live as well as possible after diagnosis and treatment
- to develop a medical follow up service that was based on an assessment of each man's individual needs rather than the traditional "one-size-fits-all" approach
- to offer patients an assessment of all their needs (a Holistic Needs Assessment), a care plan and coordinated support
- to give the patients the information and support they needed to take more control over their own health
- to give patients more information on signs of recurrence, with the aim of detecting and treating recurrence earlier.

How the project worked



132 men with stable/low risk prostate cancer who attended regular nurse-led clinics at community hospitals over a six-month period were sent a letter two weeks before attending the clinic.



The letter explained the project and was sent alongside an Holistic Needs Assessment (HNA) which they were asked to complete and bring to their appointment. The HNA asked the men about their physical, emotional, practical and financial concerns.



Of the 132 men offered the HNA, 47 completed it. Among the 85 men who didn't complete the HNA, 64 said this was because they had no concerns.



At their clinic, the men discussed the concerns they'd highlighted on the HNA with a nurse and a care plan was formulated. A copy was given to the patient.

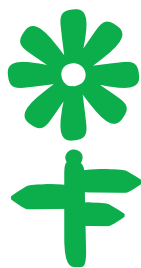


For most patients the HNA took less than 20 minutes.

- 36 took 20 mins or less
- 5 took 20 to 30 mins
- 6 took 30 to 45 mins

The more complex the needs, the longer the HNA took.

The top three concerns identified by those who completed the HNA were:



Physical: 42 patients identified 164 concerns
Practical: 17 patients identified 27 concerns
Emotional: 13 patients identified 24 concerns

41 out of 46 patients were signposted to other sources of advice and support

'I would like to complete a HNA – think it prompts you to think about things and to open discussions and raise concerns/issues you may well keep to yourself.'

Carer

Just over half of the patients (24) were signposted to their GP and others provided with leaflets. Some of the men were referred to support services including befriending services, health and wellbeing clinics, walking groups, a prostate cancer support group and a Macmillan drop in support service.

Based on the results of the HNA, men were split into three groups according to their support needs:

- 17% – mild needs, able to self manage with support
- 16% – moderate needs, partially able to self manage with support from clinical and social care teams
- 14% – significant needs, men with complex needs who need ongoing support from clinical and social care teams

These results suggest a significant proportion of men currently attending follow-up appointments in hospital may not need that level of support after the end of their treatment, and could potentially be supported to self manage, at least partially

'This is a great project to improve the aftercare for men like us.'

Patient

Conclusion

This project shows that the HNA and care plan can be successfully offered to men with prostate cancer and provides further evidence that community-based cancer follow-up is feasible and safe in men with stable or low risk prostate cancer.

These results suggest that more than 50% of men currently being followed up in secondary care could potentially be discharged from routine follow up if adequate support networks were put in place.

The project team reported that patients welcomed the HNA and it was incorporated into day to day practice relatively easily. The project builds on previous work to introduce Treatment Summaries, another element of the Macmillan Recovery Package, to people with cancer in Forth Valley.

Treatment Summaries capture the key information on the illness, treatment, possible side effects and signs of recurrence to look out for. They're available to patients and their GPs help them to understand the kind of support the patient might need. Together with the HNA & care plan, Treatment Summaries offer people with cancer more control over their care and better access to the support they need.

What next?

The short time frame of this project has not allowed the assessment of the longer term impact of this model on patient satisfaction, clinical outcome and resource utilisation. However, this pilot received positive feedback from patients and staff and has demonstrated that it's possible to offer an HNA within a community clinic, and help patients access a range of local support services. The HNA will continue to be used in Forth Valley for men with prostate cancer. Work is underway to spread the new approach and to encourage HNA use at earlier stages with patients. We hope learning from this project will be used to inform a better, patient-centred approach to follow up cancer care across Scotland.

About TCAT

TCAT was set up to improve the way people with cancer are supported during and after treatment. It's a partnership between the Scottish Government, Macmillan Cancer Support, NHS Scotland and local authorities. It tests and spreads new models of care and support built around what people with cancer need.

The statistics in this report are the results of a self-evaluation carried out by local project staff with support from Edinburgh Napier University TCAT Evaluation Team. The views expressed in this report do not necessarily represent those of Edinburgh Napier University, Macmillan Cancer Support, registered charity in England and Wales (261017), Scotland (SC039907) and the Isle of Man (604). MAC16222