

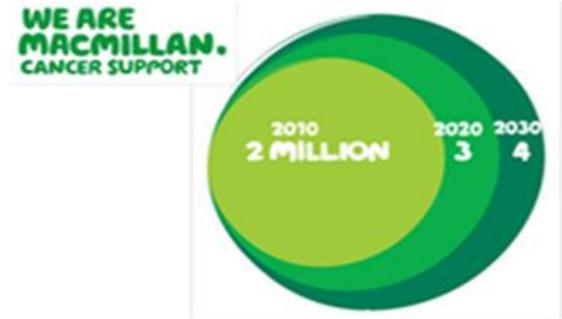
Living With and Beyond a Cancer Diagnosis
Urology Dept RD&E

Moira Anderson - CNS

Local/National Facts and Figures

North, East and West Devon –

- 1 in 5 people are living longer than 65 Yrs
- 1 in 4 by 2021
- 280,00 living with long term conditions
- 40,000 cancer patients
- 1 in 2 over 65's - cancer diagnosis *CRUK
- Patients living with a cancer diagnosis are set to double * Macmillan
- Recommendation from National Cancer taskforce to implement elements of Recovery package by April 2018



Traditional cancer follow-up

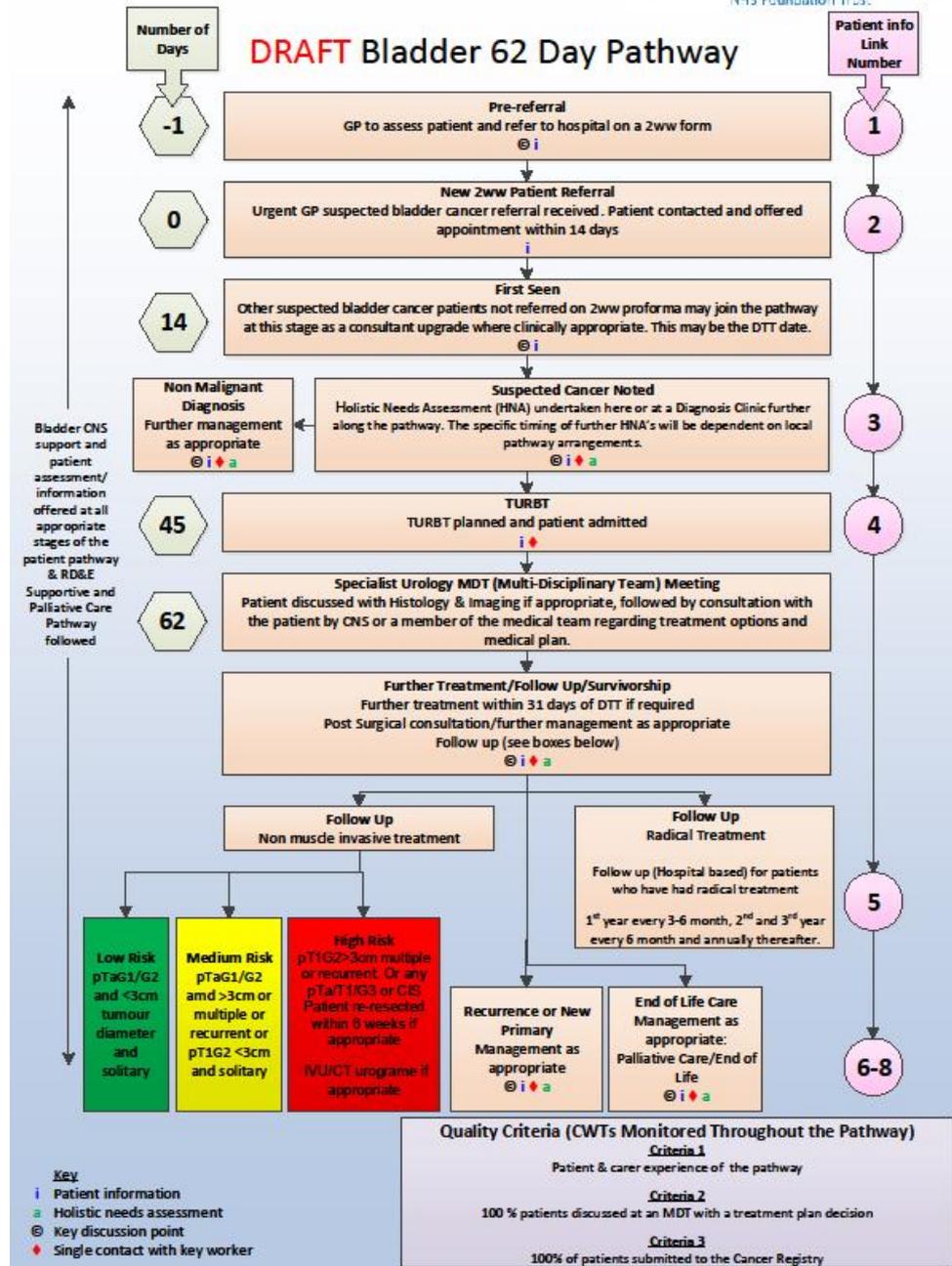
- 1 in 3 patients report unmet needs (Armes et al)
- Not sustainable
- Doesn't always add value

We need to consider new models of follow up care:-

- Support self managed follow up (Stratification)
- Empower patients to take shared responsibility for their care
- Rapid re-access

Stratified Pathway

- Under R/V
- MDT decision

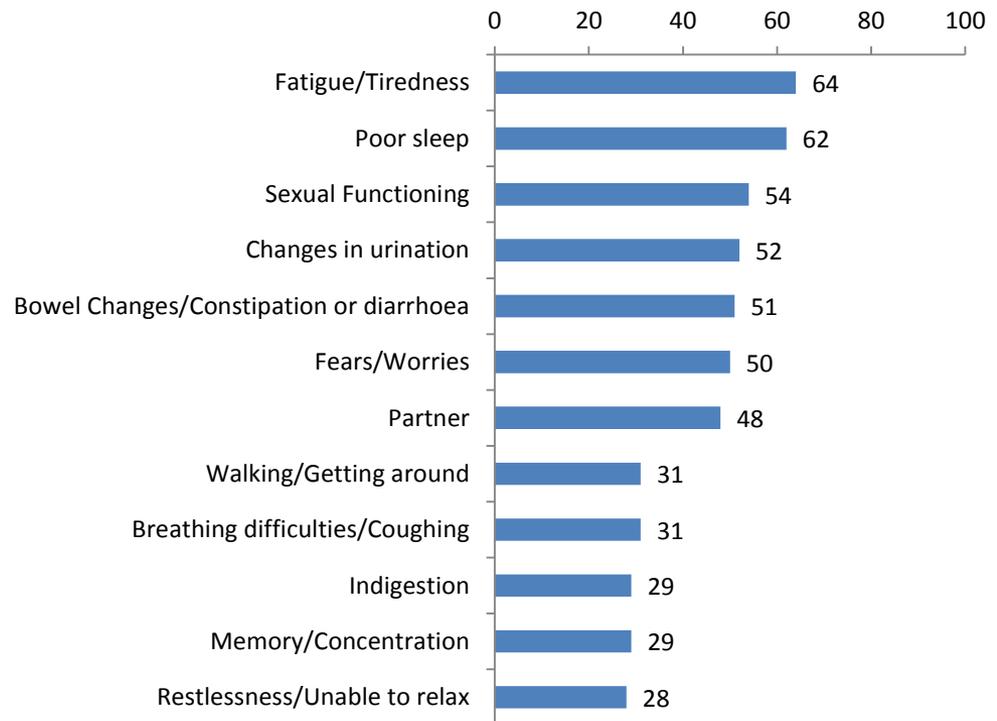


New electronic Holistic Needs Assessment (eHNA)



“ It opened up a conversation at home and now we are supporting each other. My distress is lower and we have resolved some of my concerns”

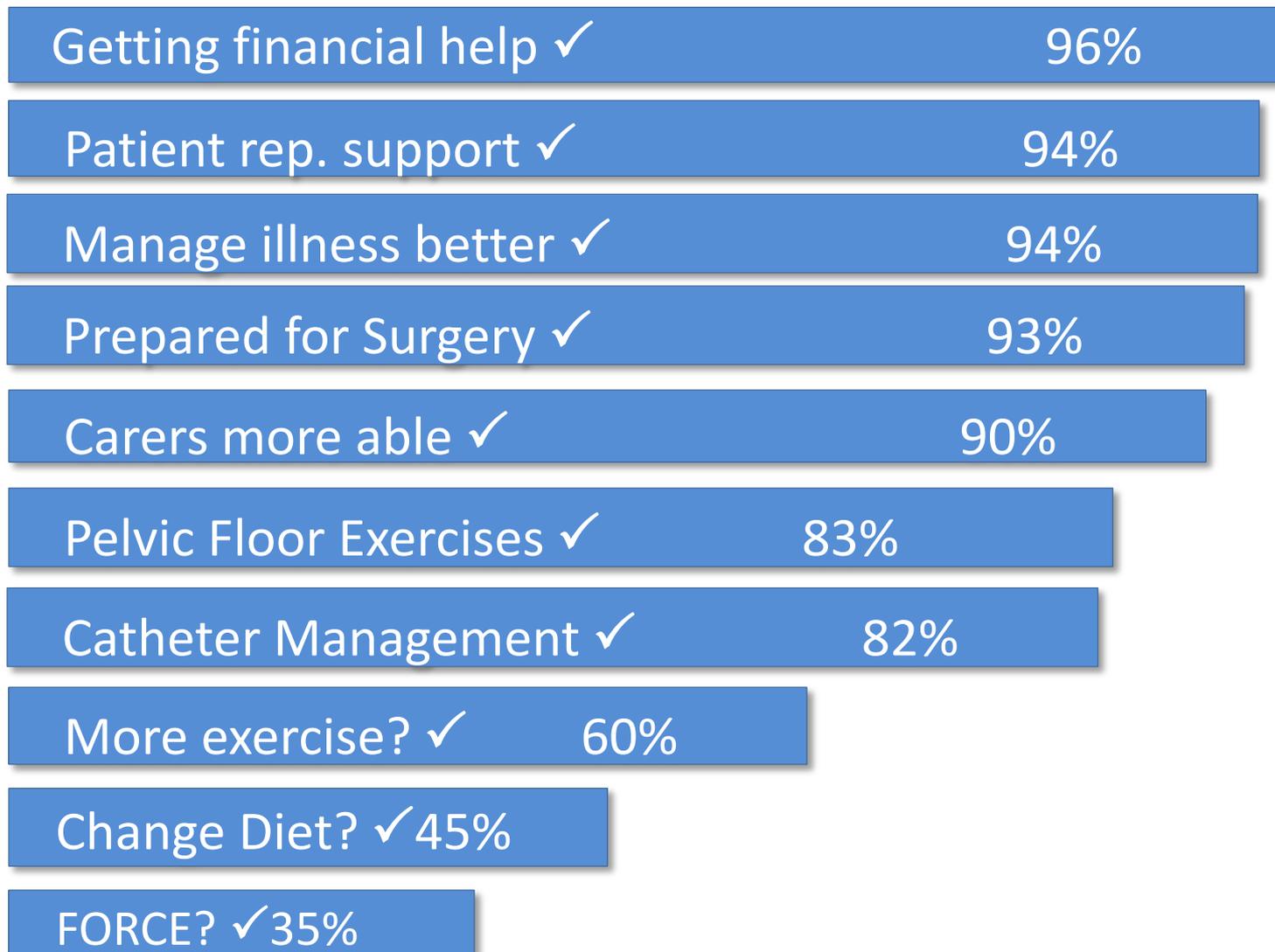
Top Concerns in Urology Cancer Patients (233)



Urology - 2015, 996 eHNA
Care plans attached

Health and Wellbeing Clinic

- Site specific clinic for RALP patients – January 2016
- Twice monthly
- Patient and guest
- Integral part of pathway – MDT sign up
- Presentation and breakout session
 - **Lifestyle Choices**
 - Bladder and Bowel Care
 - Erectile Dysfunction
 - Finance & eHNA
 - **Emotional Impact**
 - Psychosexual Discussion
 - Pre & Post operative care
 - Patient Representative
- Signpost to support services for long term recovery
- Educate and prepare patient for supported self-management



Generic Health & Wellbeing Clinics



- One stop education and information clinic - FORCE
- Offered at the beginning of the pathway
patient feedback
- Currently running weekly
- Urology –
all non RALP, 56% attendance
- New pilot – Tiverton outreach

New End of Treatment Summary

Royal Devon and Exeter **NHS**
NHS Foundation Trust

GP title GP Address	Royal Devon and Exeter Hospital(Worford) Barrack Road Exeter EX1 5DW Tel: 01392 41611
	Direct Dial: Fax No:
Datatypes: Link date:	Our Ref: Consultant:
	NHS No: Hospital No:

Dear

Re: **D.O.B.**

Your patient has now completed their initial treatment for cancer and a summary of their diagnosis, treatment and on-going management plan is outlined below. The patient has a copy of this summary.

Diagnosis:	Date of Diagnosis:	Staging:
Summary of Treatment and relevant dates:		
Possible late effects of treatment:	Treatment Aim:	Contacts for referrals or queries:
<input type="checkbox"/> Nerve damage	<input type="checkbox"/> Curative	In hours: xxxxxx xxxxxx (CNS Team)
<input type="checkbox"/> GI damage – stricture or fistula	<input type="checkbox"/> Adjuvant	Out of hours: xxxxx xxxxxx (Oncology Ward)
<input type="checkbox"/> Bladder damage	<input type="checkbox"/> Disease Control	
<input type="checkbox"/> Vaginal shortening	<input type="checkbox"/> New Adjuvant	
<input type="checkbox"/> Spinal cord damage	<input type="checkbox"/> Palliative	
<input type="checkbox"/> Cognitive impairment		
<input type="checkbox"/> Oesophageal stricture	Alert Symptoms requiring referral back to specialist team:	
<input type="checkbox"/> Cataracts	<input type="checkbox"/> Unexplained weight loss	
<input type="checkbox"/> Heart Muscle Damage	<input type="checkbox"/> Cough/Short of Breath	
<input type="checkbox"/> Secondary Cancer	<input type="checkbox"/> Bone Pain	
<input type="checkbox"/> Fatigue	<input type="checkbox"/> New lump/Skin Rash	
<input type="checkbox"/> Arthralgia or Joint Pain	<input type="checkbox"/> Abnormal Blood Test	
<input type="checkbox"/> Sterility or Menopause	<input type="checkbox"/> Abnormal Pain or Bloating	
<input type="checkbox"/> Sexual dysfunction	<input type="checkbox"/> Other new symptom without obvious explanation lasting >2-3 weeks	
Possible treatment toxicities and/or late effects:		
Advise entry onto primary care palliative or supportive care register:		
DS 1500 application completed		
Prescription Charge exemption arranged:		
Secondary Care Ongoing Management Plan:		Referrals made to other services:
tests, appointments etc:		
Require GP actions eg ongoing medication, osteoporosis and cardiac screening:		

NHS No:	Hospital No:
Patient Name	Date typed:
Consultant:	

Summary of information to the patient and/or their carer

Additional information relating to lifestyle and support needs:

Holistic Needs Assessments outcomes:		
Concerns	Description	Resolution

Holistic Care Plan Offered:

GP Consent Placeholder

Unprotected section for additional information.

Yours sincerely

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PRIVATE & CONFIDENTIAL	
cc	Medical Record

Remote Monitoring

- RD&E currently has 1441 patients on the PSA tracker
- In the last year, of the 3,294 reviews 51 patients required an OPA
- Equates to a cost saving of approximately £296,460
- Main benefit to the tracker is still patient satisfaction