

**MACMILLAN
CANCER SUPPORT**

NHS

University Hospitals Dorset
NHS Foundation Trust

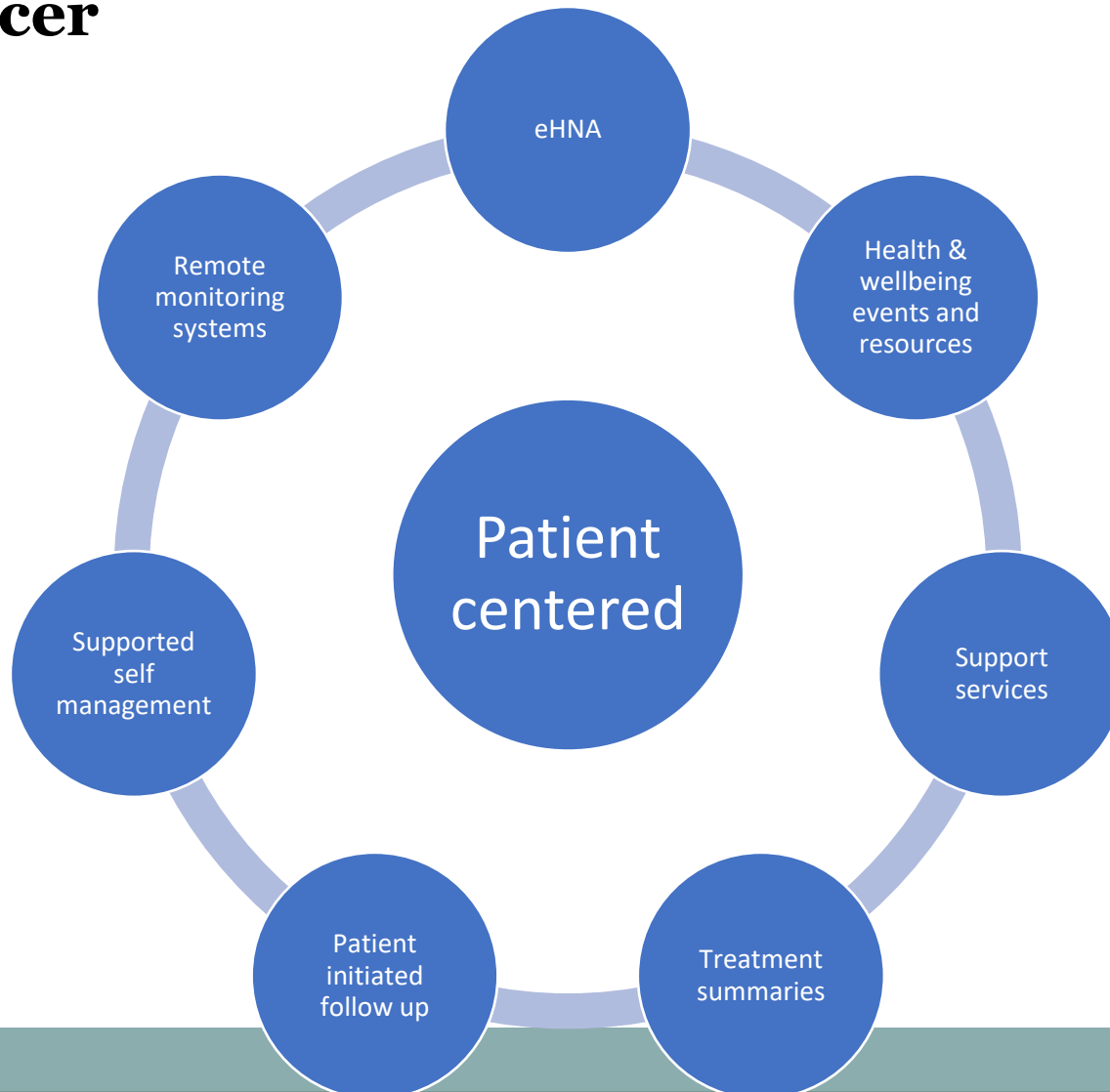
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Lead Cancer Support
worker

What a Support Worker Does



Personalised care- every person diagnosed with cancer will have access to personalised care, including needs assessment, a care plan and health and wellbeing information and support.

Personalised Care for patients living with cancer



Holistic Needs Assessment a useful tool that can help patients identify their concerns and what they might need to self-manage

- ❖ Offered to all patients once a cancer diagnosis has been confirmed. Can be completed electronically or on paper
- ❖ Form covers 6 main areas:
 - ❖ • Practical
 - ❖ • Physical
 - ❖ • Emotional
 - ❖ • Spiritual
 - ❖ • Mental
 - ❖ • Social
- ❖ Completed form leads to a supportive conversation with the patient where their concerns are discussed and they are given information, support, signposting and referrals to other services
- ❖ Personalised care plan-based on discussions is shared with the patient and uploads to the patient record on EPR
- ❖ HNA may be repeated at other points in the pathway

Physical concerns

- Breathing difficulties
- Passing urine
- Constipation
- Diarrhoea
- Eating or appetite
- Indigestion
- Sore or dry mouth
- Nausea or vomiting
- Sleep problems/nightmares
- Tired/exhausted or fatigued
- Swollen tummy or limb
- High temperature or fever
- Getting around (walking)
- Tingling in hands/feet
- Pain
- Hot flushes/sweating
- Dry, itchy or sore skin
- Wound care after surgery
- Memory or concentration
- Taste/sight/hearing
- Speech problems
- My appearance
- Sexuality

Practical concerns

- Caring responsibilities
- Work and education
- Money or housing
- Insurance and travel
- Transport or parking
- Contact/communication with NHS staff
- Housework or shopping
- Washing and dressing
- Preparing meals/drinks

Family/relationship concerns

- Partner
- Children
- Other relatives/friends

Emotional concerns

- Difficulty making plans
- Loss of interest/activities
- Unable to express feelings
- Anger or frustration
- Guilt
- Hopelessness
- Loneliness or isolation
- Sadness or depression
- Worry, fear or anxiety

Spiritual or religious concerns

- Loss of faith or other spiritual concern
- Loss of meaning or purpose of life
- Not being at peace with or feeling regret about the past

Lifestyle or information needs

- Support groups
- Complementary therapies
- Diet and nutrition
- Exercise and activity
- Smoking
- Alcohol or drugs
- Sun protection
- Hobbies
- Other

TOP 10 REPORTED CONCERNS



**WORRY/FEAR
/ANXIETY/
UNCERTAINTY
ABOUT
FUTURE**

**OTHERS –
PARTNER,
CHILDREN,
PEOPLE I
CARE FOR**

**MONEY
&
FINANCE**

MOBILITY

FATIGUE

ISOLATION

**HOT
FLUSHES
/SWEATING**

**PAIN/
DISCOMFORT**

**EATING
&
APPETITE**

**CHANGES
IN WEIGHT**

SLEEP

HNA tumour site pathways



INITIAL
DIAGNOSIS

HNA monthly reports

Month Set Up	assessment declined	expired	locked	pending	submitted	in progress	consent declined	unable to complete	not offered	Grand Total
April	65	32	179	14	4	17	1	5	3	320
May	61	13	151	95	4	41	0	9	2	376
June	15	3	78	287	8	26	0	4	0	421
Bladder RBH	0	0	2	11	0	2	0	0	0	15
Breast - Poole	1	1	33	28	2	2	0	0	0	67
Breast RBH	5	1	5	38	3	8	0	0	0	60
Colorectal - Poole	0	0	3	39	0	1	0	0	0	43
Colorectal RBH	1	0	10	9	1	1	0	0	0	22
Gynae - Poole	0	0	0	3	0	0	0	0	0	3
Gynae RBH	2	0	0	7	0	1	0	1	0	11
Haematology - Poole	0	0	6	2	0	0	0	0	0	8
Haematology Lymphoma RBH	0	0	3	9	1	1	0	2	0	16
Head and neck - Poole	1	0	1	25	0	1	0	0	0	28
Lung - Poole	2	0	1	1	0	0	0	1	0	5
Lung RBH	0	0	0	16	0	0	0	0	0	16
Myeloma RBH	0	0	0	1	0	0	0	0	0	1
622952	0	0	0	1	0	0	0	0	0	1
Prostate RBH	2	0	3	45	0	7	0	0	0	57
Renal Cancer RBH	0	0	1	7	1	0	0	0	0	9
Testes RBH	0	0	1	3	0	1	0	0	0	5
Upper GI - Poole	0	0	2	14	0	1	0	0	0	17
Upper GI RBH	0	0	0	13	0	0	0	0	0	13
Urology - Poole	1	1	7	16	0	0	0	0	0	25
Grand Total	141	48	408	396	16	84	1	18	5	1117

Cancer Support Worker Case Study

<p>Cancer Support Worker name: Brief background and context about the patient</p> <p>(Diagnosis, treatment, family situation, co-morbidities, any other relevant information)</p>	<p>Diagnosis Poorly differentiated adenocarcinoma (high grade serous vs endometrioid) endometrium</p> <p>Stage FIGO IIIC1</p> <p>Treatment Palliative chemotherapy with paclitaxel + carboplatin</p> <p>Comorbidities Osteoporosis Spondylolisthesis/spinal stenosis</p> <p>Married, lives with husband. Does not work. 3 children</p>
<p>How was the patient feeling before the HNA assessment?</p>	<p>Had lots of questions and concerns about treatment.</p>
<p>What concerns did the patient identify in their concerns checklist and at what score?</p> <p>Did additional concerns get raised during the conversation?</p>	<ul style="list-style-type: none"> • I have questions about my diagnosis, treatments or effects (11) • Other medical conditions (10) • Sex, intimacy or fertility (10) • Constipation (6) • Tired, exhausted or fatigued (6) • Sadness or depression (3)
<p>What service/referrals/advice/support did you provide for them and/or send to them?</p> <p>What resources did you make available to the patient?</p> <p>What follow up plan did you agree with the patient?</p>	<ul style="list-style-type: none"> • Referral to Amanda Brampton to discuss chemotherapy treatment and what to expect. In discussion with patient she mentioned concerns about hair loss- wig referral completed. Reminded patient about oncology hotline for any concerns about symptoms whilst having treatment • Other medical conditions- back problems- pain management discussed- been seen and given cortisone injection. Listened to patient concerns that her pain killers to manage her ongoing back pain had masked the cancer symptoms and thus her diagnosis was delayed.

· **Sex/Intimacy**- discussed concern- patient concerned as sex is currently painful and she does not feel like she wants to have sex at the moment. Feels like her husband has shut down and does not want to talk about things with her. Talked through other forms of intimacy – I how talking about things can help. Suggested Macmillan support line and also offered referral to Wessex Cancer trust for them both for some further support/counselling- referred **Constipation**- being managed with laxative. Talked through importance of fluids, diet and fibre, natural remedies such as prunes/syrup of figs. Macmillan fact sheet provided

Tired/Fatigued- Macmillan fact sheet provided, discussed exercise for reducing fatigue, planning the day around when you have the most energy and complementary therapies which can help address symptoms ·

Sadness/depression- Discussed feelings and support network- patient has a strong church support network and family, feeling very up and down and anxious at times. Struggling with other people's reactions to her telling them she has cancer- Went through mindfulness techniques- breathing, 5 things. Provided Macmillan Fact sheet and signposted to resource directory self- help tools. Referral to Wessex Cancer Trust for additional support. Discussed regular monthly follow up calls from me for support- agreed

Case Study

Background

Patient presented with abdominal bloating, reduced appetite and feeling unwell. CA125 550.

Diagnosis: ovarian cancer.

Patient concerns:

Fatigue/Mobility: Patient feels exhausted and weak most of the time. Struggled to walk to the corner shop and back yesterday. Feels very breathless and cannot get out of the bath any longer as too weak. Has to sit down to get dressed and is very breathless after making the bed. She still has no appetite, but is using Fortisips. Patient has good friends and close family and neighbours around her, but she said there are 2 things that would be very helpful for her:

1. To be able to have a bath- she wondered if there was anything that could be done to assist her- such as handrails etc
2. To get help with transport to and from hospital in Poole for treatment- discussed options of hospital transport or Community: referred to Sedcat

Actions: Contacted the Christchurch Integrated Community rehab team re an urgent referral for an Occupational Therapy assessment – patient seen within a week and provided with bathboard, long handled sponge, perching stool for kitchen and rollator

Emotional: Patient struggling with diagnosis and uncertainty and feels anxious.

Actions: Discussed concern, talked through managing anxiety, mindfulness techniques, breathing exercises. Referred to Macmillan Helpline and advised to ask for support through Macmillan BUPA counselling service – received 6 sessions of counselling through this

Health and Wellbeing: Patient would like information on diet, exercise and complementary therapies

Actions: Provided information sheets and Macmillan recipe book. Referred to complementary therapists at Poole Hospital so she can access these whilst undergoing treatment

Wellbeing: Agreed to monthly calls to offer continued support for the patient.

What else do CSW's do?

- Follow up calls and ongoing support for patients and families
- Health and Wellbeing workshops/events
- Patient triggered follow up remote monitoring
- Support groups
- End of treatment summaries
- Supporting CNS's with triaging patient calls, bookings for blood tests etc., updating patient information sheets