PRIMARY CARE 10 TOP TIPS

Carrying out an effective Cancer Care Review

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We make every effort to ensure the information in these pages is accurate and correct at the date of publication, but it is of necessity of a brief and general nature, and this should not replace your own good clinical judgement, or be regarded as a substitute for taking professional advice in appropriate circumstances. In particular check any drug doses, side-effects and interactions. Save insofar as any such liability cannot be excluded at law, we do not accept any liability in relation to the use of or reliance on any information contained in these pages, or third-party information or websites referred to in them. Consider the most appropriate way to carry out the review. While for some patients this may be face to face, others may prefer a virtual appointment. With increasing numbers of people surviving their cancer diagnosis, cancer follow up in primary care is likely to start to resemble that of other chronic diseases like COPD or Diabetes. Consider involving broader members of the Primary Care team such as practice nurses in the CCR process.

A CCR should always have a dedicated appointment slot, ideally an extended appointment, but if not, an initial appointment with follow up if necessary. Setting aside an appointment in this way sends a powerful message that primary care is there to support those affected by cancer.

Invite patients to involve a family member, carer or close friend in their review, if they would like to. Having someone else at the cancer care review may make your patient feel more supported, enable them to raise important issues and help them to recall more of the conversation later. You will also get a much clearer idea of the impact the diagnosis has had on the wider family group.

Use Macmillan's national, integrated electronic CCR template within your Primary Care IT system to support a wellstructured review. This template can be used as an aide memoir when carrying out a CCR, it also includes one pagers of supporting information which can be shared with the patient as well as providing a helpful coded record of topics discussed. <u>Macmillan's CCR Access Guide</u> provides further information on how to access the template within your IT system.

Help patients to prepare by sending them information in advance. Patients may be unsure about what the purpose of the review is and whether they can bring up particular issues with you e.g. sexual or financial concerns. It is often useful to send the patient, either with the invitation or in the days before the appointment, a clear idea of what the purpose of the appointment is, and some examples of topics which they might find useful to discuss. Perhaps send them a version of the Holistic Needs Assessment or an alternative checklist to complete prior to the appointment – this will help them better identify the issues that are important to them and that they need support with. Make use of digital systems to more easily send patients information.

Check patients' understanding of their treatment and possible late consequences. Ask about and record current or planned treatment with chemotherapy or radiotherapy, include what has been given and in the case of radiotherapy, where it has been given. This is a useful opportunity to check the patient's understanding of the purpose of any treatment. The type and location of treatments can have profound implications for the development of treatment consequences in the months and years after treatment ends.

A suggested structure for a Cancer Care Review could include:

- Discussing their diagnosis, treatment and potential consequences (physical, emotional, social, practical)
- Reviewing medication
- Finding out about the person's support network and checking if they themselves are a carer
- Agreeing a date for the next review, or agreeing that another will happen at certain points of transition in their care e.g. the end of their treatment
- Giving the patient the opportunity to raise anything else they wish to discuss

The concerns uncovered in a CCR may not be medical or within your area of expertise. Make sure you are aware of services and support in your area or involve other members of the team such as the social prescribers who might be better placed to help. Alternatively, the patient may benefit from being signposted to information sources such as the <u>Macmillan website</u> or the Support Line Services available on 0808 808 00 00 where they could speak to a professional. Some patients may prefer peer support and many charities have online support groups such as the <u>Macmillan online community</u>.

Use the review as an opportunity for health promotion as well as an opportunity to deliver personalised care. After receiving a cancer diagnosis, patients may be more receptive to high impact health promotion. There is increasing evidence that lifestyle changes and physical activity can have a significant impact on both physical and psychological health after a cancer diagnosis, as well as reducing the risk of recurrence and the impact of any treatment consequences.

When you have completed the CCR, consider sharing the information and any support plans with the oncologist or CNS to link in with the Holistic Needs Assessment the cancer care team may have done. Improving communication around the patient helps ensure a better patient experience and improved personalisation of their care.

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