

# SUPPORTING THE NEEDS OF PEOPLE LIVING WITH METASTATIC DISEASE

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## Background

As new treatments improve there may be more people living with metastatic disease for longer.<sup>1</sup> It is important that the workforce is equipped to meet the needs of people living with cancer some of whom will be living with cancer as a long term condition. The majority of adult specialist cancer nurses in England and Wales (87%) currently cover metastatic disease as part of their role. This analysis aims to explore how the workforce currently support people living with metastatic disease to help plan for the future.

## Methods

In 2017 Macmillan conducted a census of the adult cancer workforce in England and Wales. The census covered Specialist Cancer Nurses, Chemotherapy Specialist Nurses, Specialist Palliative Care Nurses and Cancer Support Workers. All posts needed to spend at least 50% of their time directly supporting cancer patients. The census collected data on whether posts were based in Acute Oncology Services and whether the post covered secondary/metastatic disease. Analysis of Specialist Cancer Nurses in England and Wales was undertaken to explore variation by area of practice and training required for the post.

## Conclusion

Analysis of the census data shows that roles that cover metastatic disease are prevalent within the specialist cancer nursing workforce, although there is variation in looking at tumour groups they focus on. Although breast has the lowest percentage of nurses who cover metastatic disease it has the highest WTE showing that there is a large workforce supporting patients with metastatic breast cancer. It not clear from this analysis whether there are enough nurses to support those with metastatic breast cancer given that similar to the rest of the breast cancer population it is likely there will be more people diagnosed with metastatic breast cancer.

This analysis also supports growing evidence that Acute Oncology Services play a role in the context of supporting patients with metastatic disease. It is encouraging to see in an ageing workforce that nurses based in Acute Oncology services are a younger demographic.

This analysis is a first step in exploring how the cancer nursing workforce currently supports people living with metastatic disease.

## Results

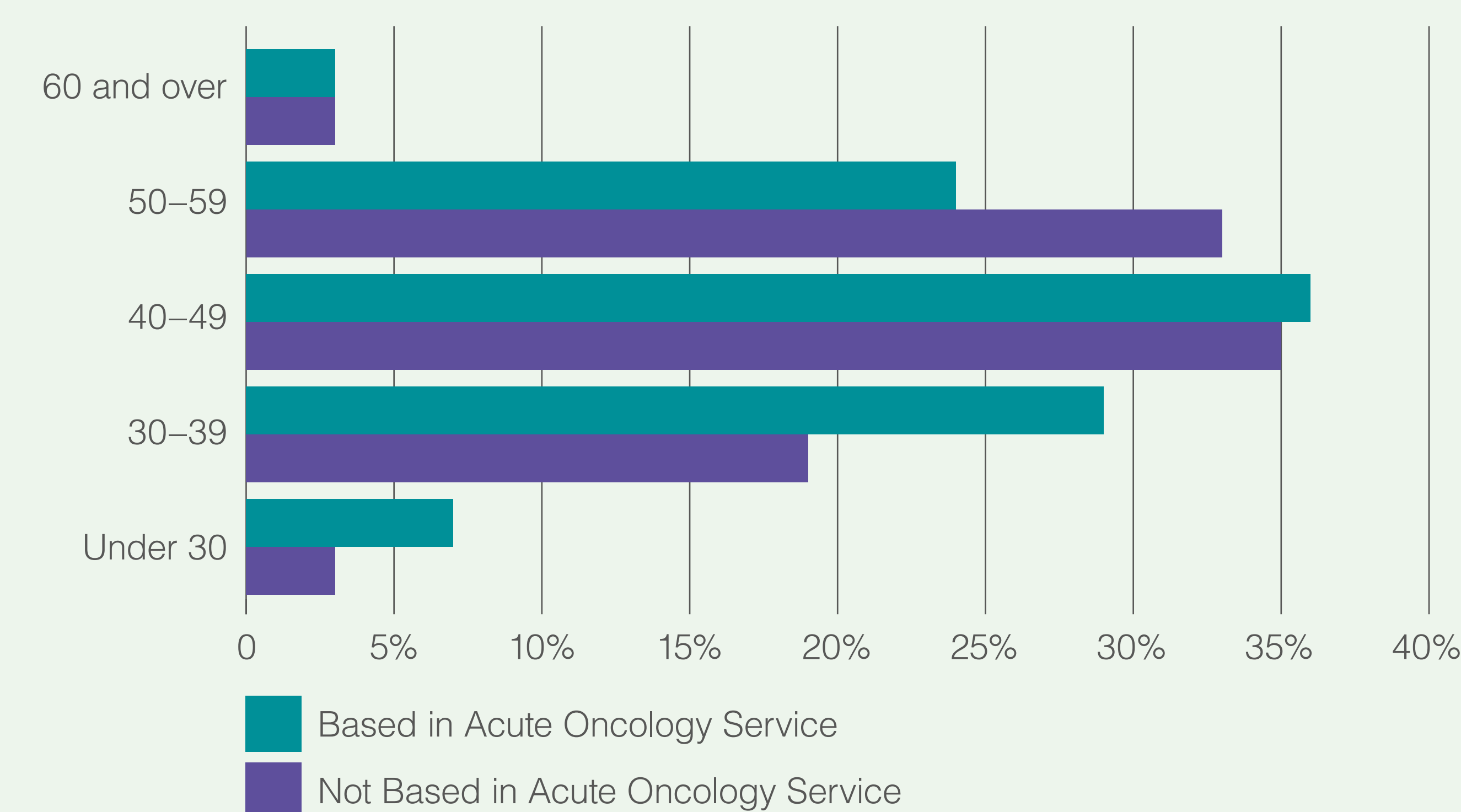
The analysis shows that the number and proportion of nurses that cover metastatic disease varies by tumour group (fig 1). Breast cancer has the smallest proportion of nurses who cover metastatic disease. However, the breast cancer specialist nursing workforce is larger than the other areas of practice. The size of the metastatic breast cancer nursing workforce is one of the biggest.

**Fig 1. Proportion of posts that cover metastatic/secondary disease by area of practice (i)**

| Area of practice in which the post holder most frequently delivers care | Percentage | Sum of WTE |
|---|------------|------------|
| Upper Gastrointestinal  | 93%        | 294        |
| Not cancer type specific  | 93%        | 542        |
| Lung  | 93%        | 363        |
| Head and Neck   | 93%        | 185        |
| Brain/Central Nervous System  | 91%        | 81         |
| Gynaecology   | 88%        | 39         |
| Colorectal  | 88%        | 210        |
| Sarcoma   | 88%        | 419        |
| Urology   | 86%        | 433        |
| Malignant Dermatology   | 84%        | 177        |
| Breast  | 75%        | 491        |

Acute Oncology services are often used by patients who are suffering from complication relating to their cancer including disease progression.<sup>2</sup> Since being introduced in 2010, Acute Oncology services have grown so in 2017, 10% of Cancer Specialist Nurses are based in Acute Oncology services. Almost all nurses based in Acute Oncology service (95%) cover metastatic disease is part of the role. Specialist Cancer Nurses based in Acute Oncology Services tend to be younger in comparison to the rest of the workforce (fig 2).

**Fig 2. Age and Posts based in Acute Oncology**



### Footnotes

(i) Haemological cancers was not included as a tumour group of focus

### References

- White R, Maher J, Macmillan Cancer Support. Describing the Three Cancer Groups. Presented at: 2017 NCRI Cancer Conference, Liverpool UK and personal communication with Public Health England's National Cancer Registration and Analysis Service
- Neville-Webbe HL, Wong H, Marshall E. Patterns of acute oncology admissions: an exploratory analysis of over 7000 patient episodes *Postgraduate Medical Journal* 2016;92:649-652