NHS

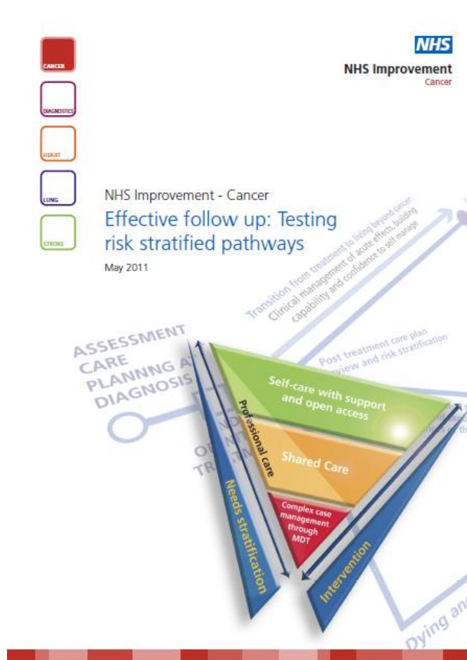
RM Partners
West London Cancer Alliance

Hosted by The Royal Marsden NHS Foundation Trust

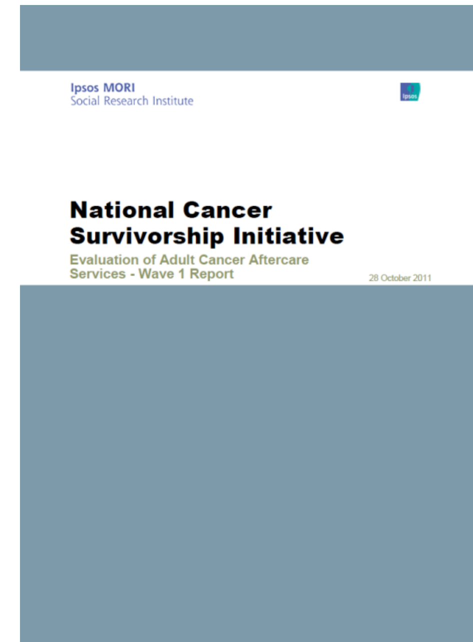
Stratified follow-up: An update of the project to date

*Working in partnership, **we will achieve world class cancer outcomes** for the population we serve*

Rationale


NHS
NHS Improvement
Cancer
NHS Improvement - Cancer
Effective follow up: Testing risk stratified pathways
May 2011
Self-care with support and open access
Shared Care
Complex case management through MDT
Professional care
Needs stratification
Intervention

Evidence:
Co-creating Health: Evaluation of first phase
The Health Foundation
Inspiring Improvement
An independent evaluation of the Health Foundation's Co-creating Health improvement programme
April 2012
Identify Innovate Demonstrate Encourage


Ipsos MORI
Social Research Institute
National Cancer Survivorship Initiative
Evaluation of Adult Cancer Aftercare Services - Wave 1 Report
28 October 2011

- Developing clinical service evaluation
- NHS Operational Planning Guidance mandated
- Building on existing FU models

Developing a baseline

Review of:

- National guidance
- Regional Models
- Different tumour sites
- Local follow-up provision

Name of Trust	Eligibility Criteria	Clinical Management Protocols	SOP	Treatment Summary	Remote Monitoring	Support Worker	Introduction to SSMFU letter	Patient Information	GP Information	Patient Portal	SFU Nurse led
	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖	✖
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Model development

- Proposed model developed via an iterative co-development process
- Ensuring robust systems for the management of surveillance are established
- Cancer Alliance-wide meeting to agree model

SFU: Breast Model Core components:

- Professional-led pathway for all breast cancer pathways
- Supported self-management pathway for Early Breast Cancer patients
- Embed needs assessment and care-planning for all patients at the end of treatment
- Ensure all patients and their GPs are provided with a Treatment Summary after completing treatment
- Process for clinician-patient review to determine and agree transition to supported self-management pathway
- Provision of supported self-management and health and well-being information
- Surveillance protocol, with process for scheduling and monitoring investigations
- Process for patients to access support and advice
- Recall process for abnormal surveillance investigations and change in patient-reported symptoms
- Clinically-led review of patients 5 years after treatment to review adjuvant treatment regime and discharge from secondary care-led follow-up
- Clinical appointment for patients requiring extended treatment regimes
- Process for discharge of patients to GP at 5 years

RM Partners Breast follow-up

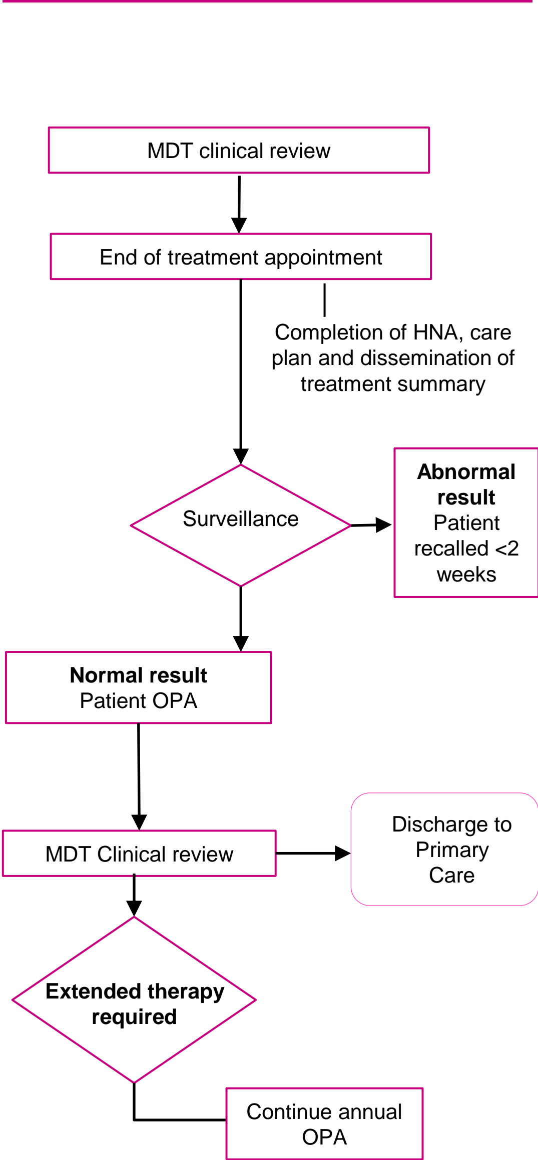
RM Partners
Accountable Cancer Network

NHS

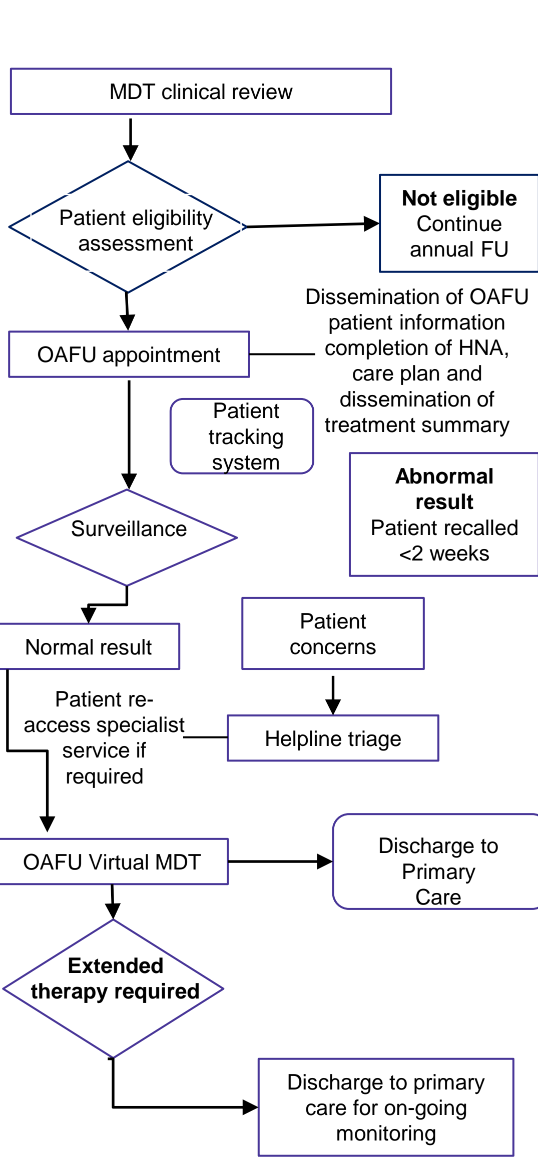
Indicative timeline

- Active treatment complete
- 6- 12 weeks post treatment
- Annually
- 5 years post treatment

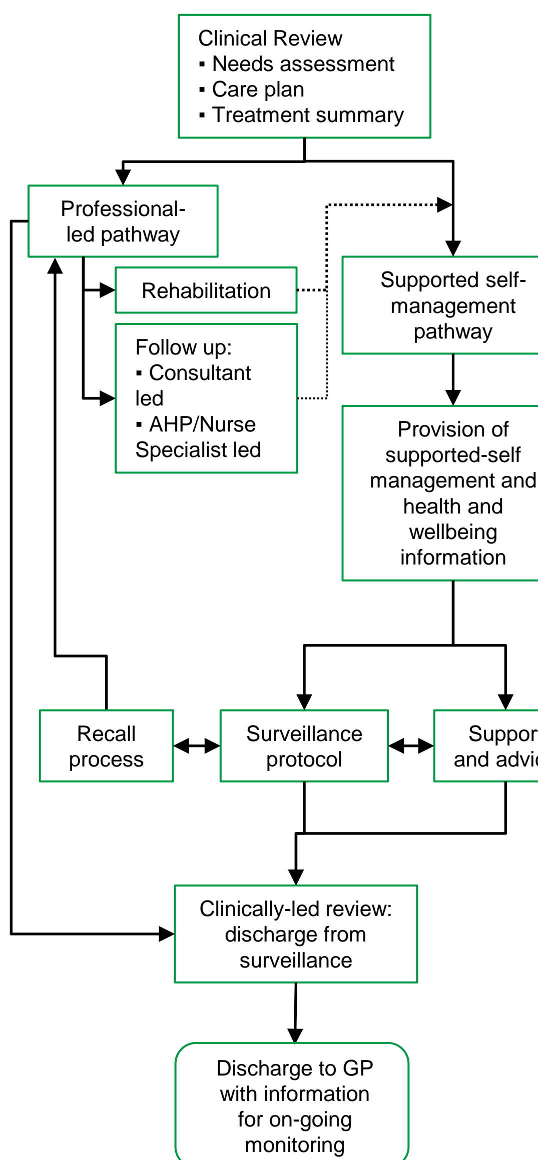
Conventional Model



Current Model



Proposed Model



Conventional Model

- Traditional model – medically led

Current Model

- Incorporates Professional led and Open Access Follow-Up (OAFU) pathways
- OAFU introduced in 2014

Proposed Model

- Incorporates professional led and supported-self management (SSM) pathways
- Working towards embedding HNAs and Treatment Summaries to address unmet needs
- Exploring new delivery models for SSM information and patient facing support worker roles

Implementation

- Focussed clinical and operational support dedicated to the project
- Senior management sponsorship across all organisations
- Core components agreed at Alliance level with ability to flex the model depending on individual site requirements
- Exploring new ways of working: supported-self management workshop
- Development of Trust standard operating procedures and processes
- Examining barriers in completing Treatment Summaries, needs assessments and care plans
- Standardising patient and GP documentations
- Standardising bone health management guidelines