

With you in mind, teamwork and collaboration

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Aim:

To examine the impact of timely intervention through early health and wellbeing education, information sharing and signposting to appropriate services

Intention:

To facilitate a reduction of financial concerns by the end of the patient treatment pathway.

Co-production

- Collaborative working with FORCE
- LWBC steering group
- Patient focus groups
- Cancer CNS working group
- CPES data analysis

Collaborative working with FORCE

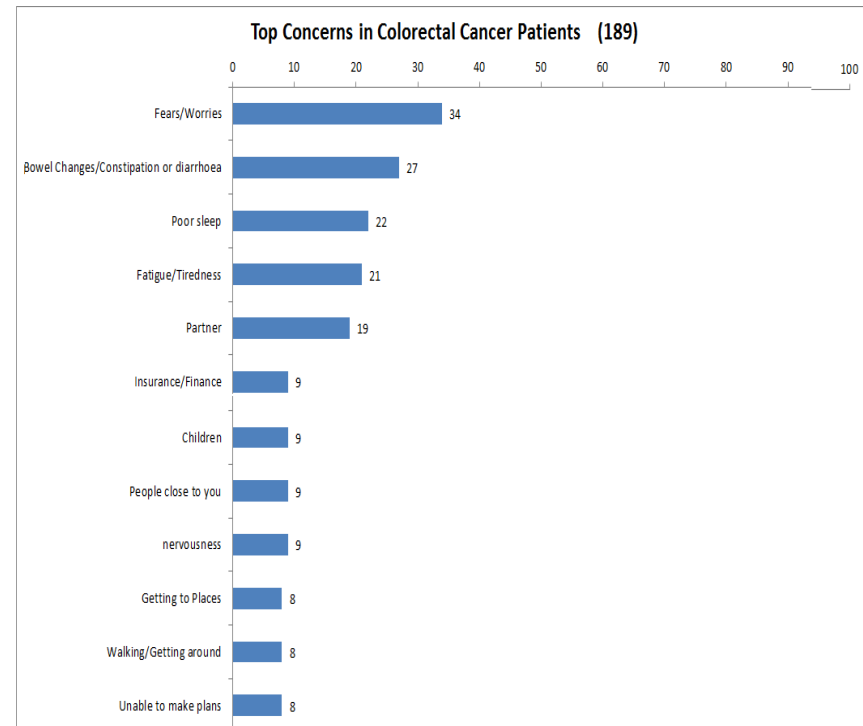
Development of the Holistic Needs Assessment Tool.

- Initially we offered and recorded eHNA soon after diagnosis.
- Second point eHNA introduced and recorded after treatment completed.
- Funded by FORCE, internal IT services developed the reporting capabilities of the eHNA tool enabling individual team to have immediate access to the information.

To better understand the patient perception

- CPES outcomes were presented at the monthly Clinical Nurse Specialist (CNS) meeting, lower than expected national average
- To better understand the usefulness and clarity of current HWBC financial information.
- Patient focus groups were set up

eHNA Reporting tool



Upgrade to HWBIS

Travel Insurance

- Talk to your usual travel company
- Try insuring one holiday at a time
- A certificate from your Doctor saying you are fit to travel is sometimes required – ask your GP about costs for this service
- A list of Insurance companies can be provided by FORCE or from the Cancer Research UK website



Prescription Poster OPD



**You are entitled to
free prescriptions
if you have a cancer
diagnosis.**

**Please ask your GP receptionist to obtain
the exemption form.**

14th May 2014

Impact and Results

eHNA data

Analysis from the eHNA tool demonstrated a reduction in people selecting financial concerns at completion of their treatment following early attendance of a HWBC

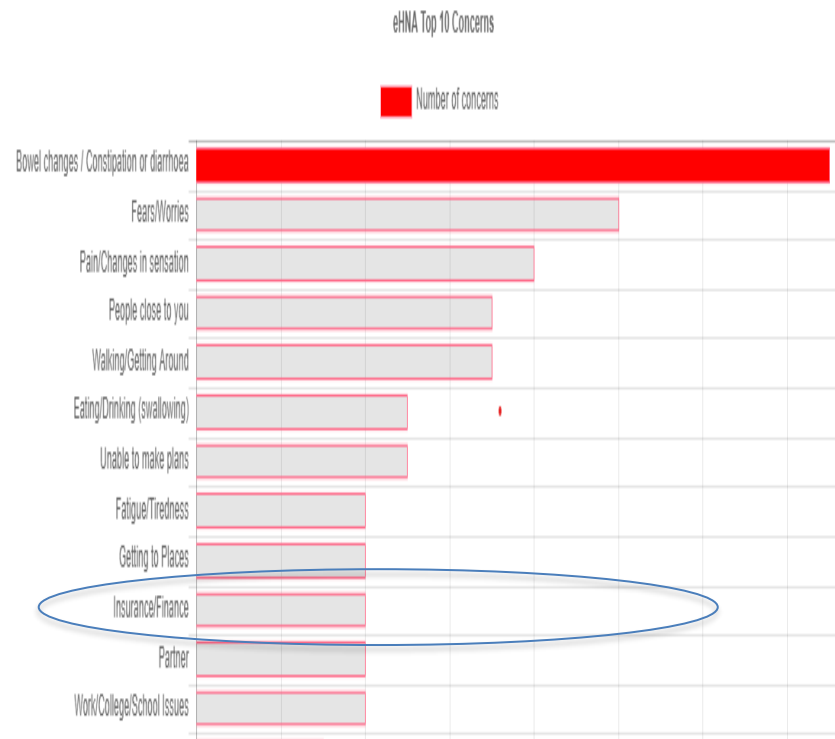
Pathway Point	Assessments	Insurance/Finance selected	%
Soon after diagnosis	1806	128	7.1
Completion of treatment	1078	30	2.8

2018 CPES results

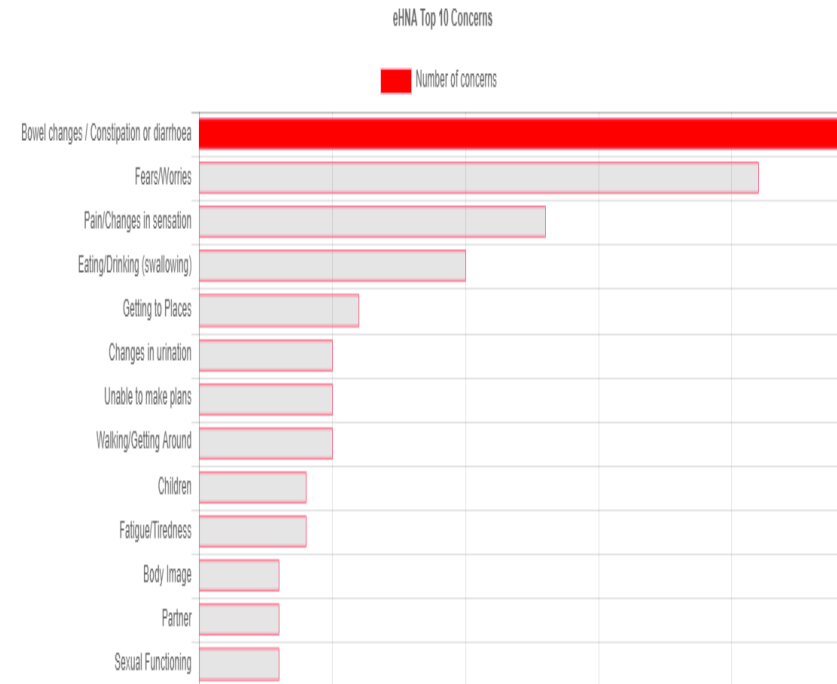
Indicated improvements in the following area

Question	2017	2018
'hospital staff gave information on getting financial support'	68%	73%
'hospital staff told patient they could get free prescription'	83%	87%

Soon after diagnosis



End of treatment



Results continued

Patient footprint accessing financial services at FORCE

Increase in people accessing face – to – face financial support

Year	Appointment type	Patient numbers
2017	Face-to-Face	458
2018	Face-to-Face	508

Patient Survey

We surveyed 200 attendees asking ‘Do you feel you have received information to manage the financial impact of cancer’. 200 questionnaires were sent out. The return response rate was 78%. 59% strongly agreed/agreed with the statement. 37% felt neither/nor with the information and 2% said they didn’t require this information.

Key learning points

- CPES data is useful as a benchmark for service development.
- Patient focus groups/surveys supports service development
- Early HWBI reduces concerns later in the pathway
- Signposting to FORCE improves patient outcomes
- Shared learning and co production ensures sustainability of new services

What makes us stand out?

- Patient experience can be prioritised within a clinical pathway and used to benchmark improvements in health care systems alongside a clinical pathway.
- We have listened and involved patients in our service re-design, alongside data analysis.
- Providing equity of high quality information at an identified point on the pathway improves the patient experience as demonstrated in the CPES data.
- Collaborative working with FORCE supports innovation and enables information analysis to better understand local issues.
- Right care at the right time.
- Patients inspired towards supported self-management by enabling choice and control in an area of their life.
- Model easily transferable to all long term conditions in acute and primary care settings

- Focus groups
- Map against CPES data to enable continuous development and maintain relevance
- Collaboration with FORCE for quick feedback on foot fall and service use
- Align to the Ten Year plan to support implementation of Personalised care and support.