Available chemotherapy locations and subsequent take up: A mixed methods study

Kate Edridge (Macmillan Nurse Practitioner) University Hospital Southampton (UHS)
NHS Foundation Trust, Tremona Road, Southampton, Hampshire, SO16 6YD, United Kingdom

BACKGROUND

- Patients diagnosed with cancer living in the south of England, who have chemotherapy as an outpatient treatment, attend a regional National Health Service (NHS) cancer centre. This centre serves a population of around 1.7 million people. UHS currently uses the oncology day unit, and two locations in the community for administering treatments.
- Patient's meet with health care professionals (HCPs) prior to each cycle of chemotherapy.
- Despite the ever-evolving changes taking place in cancer care delivery, little is known specifically detailing the information patients receive from HCPs, and the quality of this in relation to choosing where to have chemotherapy treatments administered.

AIM

- To explore if, and how, outreach chemotherapy is being offered by clinicians to Gastro-intestinal (GI) cancer patients; what information patients received, and what choice they made in relation to where their chemotherapy was administered.

METHODS

- Ethical approval was established in 2017. Data collection occurred over five months between May - September 2017.
- Data included ($n = 10$) GI cancer patients followed at three time points over chemotherapy treatment cycles using semi-structured telephone interviews ($n = 28$).
- HCPs ($n = 34$) completed six closed questions and ($n = 20$) one free text response survey sent online to their work email address.
- Descriptive statistics and thematic analysis were used to establish themes and make comparisons.

UHS Chemotherapy Unit

Outreach Location A

Outreach Location B

RESULTS

- HCPs ($n = 34$, 100%) know the hospital has an outreach service for providing chemotherapy, but at the time of the survey, only ($n = 19$, 55.9%) members of staff had referred 1-5 patients in the previous month.
- Outreach was only offered to ($n = 5$, 50%) participants in total across the three-telephone interview timepoints. Of those, ($n = 3$, 30%) patients embarked on having their chemotherapy administered in locations outside of the central unit.

% of participants treatments were administered in these locations at the point of each telephone interview

- Results identified, demonstrate that HCPs are confused as to whose responsibility it currently is, and who HCPs think should be referring patients.

“Offering can be done as long as it is realistic for a patient to be there i.e. physical capacity, and health in general”. (2nd Registered Nurse).

CONCLUSION

- The existing process does not allow for all patients to receive information about available treatment locations and therefore doesn't enable the patient to make an informed choice.
- Suggestions to improve the service were made, including re-writing the current policy, developing a clear referral pathway, establishing a nurse to oversee the outreach service, better advertising, educating the staff, and streamlining HCP responsibilities.

ACKNOWLEDGEMENTS

This work was funded by UHS as part of my MSc requirements whilst studying at University of Southampton with the support of my research coach Dr Richard Wagland.
Thank you to Macmillan and the JC fund for subsidising this trip.

FURTHER INFORMATION

[HCP Survey](#)
[Patient Interview Topic Guide](#)

Kate Edridge
kate.edridge@uhs.nhs.uk