

**Title:**

Process Evaluation of the Implementation of Cancer Treatment Summaries for Cancer Survivors in England

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**Session Title:**

Research Poster Session 2

**Slot (superslotted):**

RSC PST 2: Saturday, 29 July 2017: 12:00 PM-1:30 PM

**Slot (superslotted):**

RSC PST 2: Saturday, 29 July 2017: 2:45 PM-3:30 PM

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**Abstract Describes:****Keywords:**

Cancer survivorship, Evaluating nursing care and Promoting clinical outcomes

**References:**

American Cancer Society (2014) *Cancer Treatment and Survivorship Facts and Figures 2014-15*. American Cancer Society, Atlanta

Independent cancer Task Force (2015) *Achieving World Class Cancer Outcomes: A Strategy for England 2015-2020* accessed at: [http://www.cancerresearchuk.org/sites/default/files/achieving\\_world-class\\_cancer\\_outcomes\\_-\\_a\\_strategy\\_for\\_england\\_2015-2020.pdf](http://www.cancerresearchuk.org/sites/default/files/achieving_world-class_cancer_outcomes_-_a_strategy_for_england_2015-2020.pdf)

Jabson, J. (2015) Follow-up care instructions, treatment summaries, and cancer survivors' receipt of follow-up health care and late/long term effects *Support Care Cancer* 23: 1851-1856

Jun, J., Kovner, C. and Witkoski Stimpfel, A. (2016) Barriers and facilitators of nurses use of clinical practice guidelines: an integrative review *International Journal of Nursing Studies* 60, 54-68

National Cancer Survivorship Initiative Recovery Package. (2014) *The recovery package* accessed at: <http://www.ncsi.org.uk/what-we-are-doing/the-recovery-package/>

Rajasekhar, P., Rees, C., Nixon, C., East, J. and Brown, S. (2016) Factors influencing change in clinical practice *International Journal of Health Care Quality Assurance* 29 (1), 5-15

Rechis, R., Beckjord, E. and Nutt, S. (2014) Potential benefits of treatment summaries for survivors' health and information needs: results from a LIVESTRONG survey *Journal of oncology Practice* 10 (1): 75-78

**Abstract Summary:**

This research describes factors that influenced the implementation of cancer treatment summaries and the experience of cancer survivors who have received them in six hospitals in England 2015-2016. The

challenges and driving forces nurses experienced are explored as well as the experience of cancer survivors who received a treatment summary.

**Learning Activity:**

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
1. The learner will be able to compare and contrast national and international perspectives on the use of cancer treatment summaries as part of a cancer care package.	A local and national overview of the use of treatment summaries will be presented and a summary of the progress towards their implementation in the hospitals studied will be compared to international findings.
2. The learner will be able to describe and discuss the experience of cancer survivors when treatment summaries are used as part of their care package.	The experiences of cancer survivors from two of the six hospitals studied will be discussed and the findings will be discussed in the context of national and international policy and guidance.

**Abstract Text:**

**Purpose:**

The purpose of this study is to examine the factors that influence the implementation of cancer treatment summaries and cancer survivors' experiences of receiving them. The percentage of people living beyond cancer continues to increase due to improved prevention strategies and early treatment interventions (Independent Cancer Task Force, 2015; American Cancer Society, 2014). The use of an integrated package of care including care plans, treatment summaries and follow up care has been proposed to support a reduction in side effects following treatment and early detection of returning disease (National Cancer Survivorship Initiative Recovery Package, 2014).

**Methods:**

Six hospitals took part in the study during 2015 and 2016. A mixed method approach was used and included a survey of lead cancer nurses in the sample hospitals to determine the progress made towards the implementation of treatment summaries and factors that influenced their progress. The second approach included the use of interviews and focus groups to describe cancer survivors' experiences of receiving a treatment summary. Ethical approval was obtained from the participating university and permission to gain access for data collection was collected from all participating sites. Data were analysed using SPSS and qualitative data analysed using thematic analysis. **Results** have been presented to the participating hospitals and strategic boards

**Results:**

Data were collected in the first six months of project implementation. Results indicated that in the sample group 49% of colorectal patients and 62% of breast cancer patients received a treatment summary after completing a treatment episode. Factors that affected the implementation process included human resources, availability and accessibility of information technology, information about patient selection and documentation, education, multidisciplinary involvement, leadership champions, and feedback from staff and patients. For cancer survivors, not all could remember having a treatment summary, they felt overwhelmed by the amount of information received. Those who did remember found them helpful and provided them with information that they could share with their family and friends. The participants interviewed did not experience any integration between secondary and primary care services following their treatment.

**Conclusion:**

The percentage of patients receiving treatment summaries compares favourably with implementation data published internationally from USA and UK (Jabson, 2015; Rechis et al, 2014). The factors identified as influencing the implementation of treatment summaries were similar to those experienced by nurses implementing service improvement plans (Jun et al, 2016; Rajasekhar et al, 2016). For the cancer survivors, the experience of receiving a treatment summary felt like receiving a piece of a puzzle that would eventually help them to understand the picture. The individuality of each survivor and their coping strategies emerged as the interviews and focus groups progressed and highlighted that some survivors will be willing to engage in follow up services while other will not, preferring to develop their own coping strategies.