

# Process evaluation of the implementation of cancer treatment summaries for cancer survivors in England

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## Purpose

The purpose of this study was to examine (1) the factors that influence the implementation of cancer treatment summaries (**box 1**) and (2) cancer survivors' experiences of receiving them. The number 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).

## Aims

1. To identify the progress that has been made towards the implementation of treatment summaries between April 2015 and September 2015 in six acute hospitals in England.
2. To identify factors that have influenced the process and progress of the implementation of treatment summaries in the nominated hospitals.
3. To evaluate the experiences of service users who have received cancer treatment in these trusts between April and September 2016.

## Method

### Stage 1: Survey of lead cancer nurses

A questionnaire was used to determine progress made towards the implementation of treatment summaries and factors affecting this.

### Stage 2: A case study approach involving service users

Subject to informed consent, service users who had received cancer treatment during 2015 were invited to attend focus groups or interviews to share their experiences of receiving treatment and treatment summaries as part of their overall care.

## Participants

Of the six hospitals that agreed to participate in the evaluation, three were able to provide data for the time period specified. In these hospitals, the percentage of cancer patients who completed a treatment episode and received a treatment summary between April and September 2015 was:

**Hospital A:** colorectal 42% breast 36%  
**Hospital D:** colorectal 48% breast 43%  
**Hospital E:** colorectal 54% breast 100%

## Challenges

The survey of lead cancer nurses from six hospitals revealed that staff had experienced a number of challenges when implementing treatment summaries. The themes identified (**box 2**) included:

- resource challenges
- availability and accessibility of information technology (IT) systems
- lack of clarity over patient selection and documentation
- role expectations and staff engagement

## Drivers

The survey of lead cancer nurses revealed factors that had driven forward the use of cancer treatment summaries and ideas for future development. The themes identified (**box 3**) included:

- setting targets
- leaders with vision who engage all staff
- education and updates
- multidisciplinary involvement and collaboration
- positive feedback and perceived benefits
- information technology (IT) systems

## Service user experience

Two hospitals agreed to take part in the service user evaluation of treatment summaries. Data were collected using one focus group of four people and two face-to-face interviews. The participants had experienced treatment for breast, throat or colorectal cancer. The five themes identified (**box 4**) included:

- timing and delivery of treatment summaries
- purpose of the treatment summary
- integration of care
- quality of care
- family centred care

## Conclusions

1. The percentage of patients receiving treatment summaries in this study (colorectal, 49%; breast, 58%) was higher than that in other studies in the UK and USA (31-38%) (Jabson, 2015; Rechis *et al*, 2014).
2. The factors identified as influencing the implementation of treatment summaries in this study were similar to those experienced by nurses implementing service improvement plans (Jun *et al*, 2016; Rajasekhar *et al*, 2016).
3. For service users in this study, the treatment summary provided a reminder of the information received as part of the discharge planning process and provided a resource for sharing information with their families. Some, however, were overwhelmed by the volume of information received.

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## References

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## 1

### What is a Cancer Treatment Summary?

A treatment summary (TS) is a tool designed to improve communication between cancer services, the patient and primary (community) care services.

It includes:

- Date of diagnosis
- Diagnosis
- Staging information
- Treatment aim
- Summary of treatment and relevant dates
- Possible treatment toxicities and/or late effects
- Alert symptoms that require referral back to a specialist team
- Secondary care on-going management plan
- Required GP actions in addition to the cancer care review
- Summary of information given to the patient about their cancer and future progress
- Additional information including issues relating to lifestyle and support needs
- Useful contact numbers
- Other service referrals made
- DS1500 application completed for specific benefits if terminally ill
- Prescription charge exemption arranged

## 2

### Challenges when implementing treatment summaries

Quotes from lead cancer nurse respondents included:

Theme: **resource challenges**

- Limited staff time and pressure of workload
- Staffing shortages, especially qualified and speciality nurses
- Increasing numbers of patients being diagnosed with cancer

Theme: **availability and accessibility of IT systems**

- The interface between the IT systems of primary and secondary care
- The difficulty with extracting data on TS from the electronic database
- Working around IT systems rather than them working for us

Theme: **lack of clarity over patient selection and documentation**

- Not clear what a patient treatment summary constitutes
- Not clear who treatment summaries are aimed at
- Lack of clarity over what is the correct paperwork

Theme: **role expectations and staff engagement**

- An expectation that this is the role of nursing rather than medical staff
- Unrealistic expectations
- Implementation basically down to the lead cancer nurses

## 3

### Drivers of the implementation of treatment summaries

Quotes from lead cancer nurse respondents included:

Theme: **setting targets**

- Awareness and need to comply with targets
- Need for national targets

Theme: **leaders with vision**

- Individuals who see the value with time to drive the initiative forward
- Leadership by lead nurses, doctors and cancer service management team

Theme: **education and updates**

- Lead cancer nurse input into the education of district nurses on cancer reviews
- Combined education sessions between primary and secondary care

Theme: **multidisciplinary involvement and collaboration**

- Multi-clinical involvement; an increase in clinicians' involvement
- Greater collaboration between participating hospitals across the region

Theme: **positive feedback**

- Staff motivated and enthusiastic and can see the value in this initiative
- Positive feedback from GPs and patients

Theme: **IT systems**

- Need to improve IT systems linking primary and secondary care
- Need to develop an electronic treatment summary that links with other systems

## 4

### Service user experience

Quotes from service users' focus groups and interviews included:

Theme: **timing and delivery of treatment summaries**

- The treatment summary came when I was discharged from hospital
- I didn't receive anything like that, at least I don't remember

Theme: **purpose of the treatment summary**

- The information is very clear... it reinforced what I already knew
- You should have two forms, one for the patient and one for the professional

Theme: **integration of care**

- The hospital has been fine but I've not had anything from my GP
- It's all to do with the hospital; I see my GP once a year for blood tests

Theme: **quality of care**

- I am in a privileged position because we receive a lot of information
- The system works

Theme: **family-centred care**

- We have coped with it quite well, haven't we? It was a joint thing; we did it together.
- They let me keep the mask; all the family wanted to see it, especially the grandchildren.