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Improving cancer outcomes and increasing efficiency

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Why cancer and older people?

60%

of new cancer diagnoses are amongst older people (65+)

1.3m

older people (aged 65+) are living with cancer in the UK

14,000

cancer deaths in the UK in those aged 75+ could be avoided if UK cancer mortality rates in the elderly were the same as the USA

75%

of all cancer deaths in the UK are amongst older people (65+)

1/4

of the UK population who will be aged 65+ in 2030

The project

Department of Health

•2011 / 2012 five cancer networks

• Improve access to appropriate treatment for older people

• Improving assessment (CGA)

• Practical support

• Over 750 patients age 70+

Cancer Services Coming of Age:
Learning from the Improving Cancer Treatment Assessment and Support for Older People Project

December 2012

age UK
Improving later life

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http://www.macmillan.org.uk/Aboutus/Healthandsocialcareprofessionals/Macmillansprogrammesandservices/Improvingservicesforolderpeople/ProjectImprovingcancertreatment,assessmentandsupportforolderpeople.aspx

What is Comprehensive Geriatric Assessment?

- Multidisciplinary
- Intervention is key
- Most effective on home visit

Traditional CGA comprises the following elements:

Medical assessment	Problem list Comorbid conditions and disease severity Medication review Nutritional status
Assessment of functioning	Basic activities of daily living Instrumental activities of daily living Activity/exercise status Gait and balance
Psychological assessment	Mental status (cognitive) testing Mood/depression testing
Social assessment	Informal support needs and assets Care resource eligibility/financial assessment
Environmental assessment	Home safety Transportation and tele-health

Principles for Good Practice

2.2 Age friendly cancer services will:

- Engage elderly care specialists as an active part of the cancer care team and adopt a multidisciplinary approach to the assessment and management of all patients.

- Ensure an early and appropriate assessment of an older person is undertaken. The assessment should not only inform a dialogue about cancer treatment, but should identify and address unmet physical, psychological and social support needs. Follow up assessments should be undertaken at defined points throughout the treatment journey, to identify and address changes in need.

- Ensure everyone gets the maximum benefit from cancer treatment and associated supporting therapies by effectively managing other health conditions and incorporating reasonable adjustments into care planning to address additional needs.

- Establish services and clear referral pathways for both outpatients and inpatients to address needs identified by assessment. This includes establishing clear links with voluntary sector agencies, social services, and specialist teams such as falls prevention teams, continence specialists and dementia specialists.

- Ensure effective communication systems are in place to facilitate coordinated care and informed decision making.

- Ensure all clinical and non-clinical staff are supported with the training and access to resources required to conduct appropriate assessment and follow up care of all patients. In order to do this, it is vital that systems allow sufficient clinic time to undertake this work in day-to-day practice.

Improving outcomes

- Poly-pharmacy
- Nutrition
- Falls
- Social Isolation
- Transport
- Carer support

Improving efficiency

- primary and secondary prevention
- discharge delay
- improved communication
- increased treatment compliance
- streamlined process

Summary

- Cancer outcomes in the UK need to improve
- Cancer is a disease of age
- Cancer accounts for a high proportion of NHS spending
- Unmet practical and social support needs can present a barrier to effective cancer treatment.
- There is opportunity for multiple agencies to work in partnership with cancer services to ensure appropriate support is provided throughout treatment

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