

How will cancer survivors use survivorship care plans (SCPs)?

Nicole Kinnane (Australian Cancer Survivorship Centre, a Richard Pratt Legacy, Peter MacCallum Cancer Centre, Australia), Amanda Piper (Australian Cancer Survivorship Centre, a Richard Pratt Legacy, Peter MacCallum Cancer Centre, Australia) Michael Jefford (Australian Cancer Survivorship Centre, a Richard Pratt Legacy, Peter MacCallum Cancer Centre, Australia)

BACKGROUND: SCPs have been internationally endorsed as a multi-purpose communication tool that can support care transitions and shared care and enhance patient-centered care and self-management during the post-treatment survivorship phase. Survivors value SCPs. There is limited uptake of the delivery of SCPs. The literature highlights a number of challenges associated with widespread implementation.

AIM To develop sustainable approaches to deliver SCPs, we investigated how cancer survivors might use SCPs.

METHODS: The study was conducted at a single site (Peter Mac). Eligible patients from 10 clinical services up to 12 months post cancer treatment and/or receiving ongoing cancer treatments, were approached in outpatient clinics or via telephone interview. A survey assessed survivors' preferences regarding format, content and intended use. Proposed minimum sample size was 200.

RESULTS: Two hundred and thirty surveys were returned (RR 68%). Over half (56%) of respondents had completed treatment within the previous 6 months, with 10% receiving ongoing treatments. Most (65%) had not previously received a SCP, and more than one third (42%) had not received any information resources at the end of treatment. Almost all (98%) desired further information. Most common information requested in a SCP was: 'list of symptoms to watch out for and report' (76%), 'summary of treatment received' (70%), 'plan for when I should have follow-up appointments' (70%), 'a list of tests I am going to have and when' (69%) 'things I can do to look after myself' (67%). Most common suggested use was as: 'a record of cancer treatment' (63%), 'a reminder of things to do to look after myself' (57%) and 'to help me understand my cancer experience' (56%). Over half (52%) would share the information with their general practitioner (GP, primary care physician). Most indicated a preference for paper-based resources (91%). There was support for both brief (36%) and more detailed versions (42%). Over half (55%) requested that information be delivered during face-to-face discussion with health professionals. Regular telephone support from the treating health care team was most commonly suggested as an additional service to aid transition.

CONCLUSION: While similar to international findings, results suggest alternate ways of providing the information that survivors desire. A flexible approach to SCP interventions is warranted. Involving consumers in the development and review of SCPs is supported. Impressing the value of sharing SCPs with GPs is recommended.

