

What is the experience of consumers receiving and accessing cancer survivorship care across Victoria, Australia?

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VICTORIAN INTEGRATED CANCER SERVICES



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Background

- It is widely recognised that cancer survivors and their carers may experience ongoing side-effects of cancer treatment, and have unmet needs relating to physical, emotional, social and financial aspects of their life.¹
- Improving the health and wellbeing of cancer survivors and carers is a priority area of the Victorian Cancer Plan 2020-2024², and the Victorian Integrated Cancer Services (VICS) Implementation Plan 2021-2022³.
- In 2022, with funding from the VICS, the Australian Cancer Survivorship Centre (ACSC) and VICS commenced a strategic collaboration to co-design and implement statewide improvements to cancer survivorship care in Victoria, Australia.

Aim

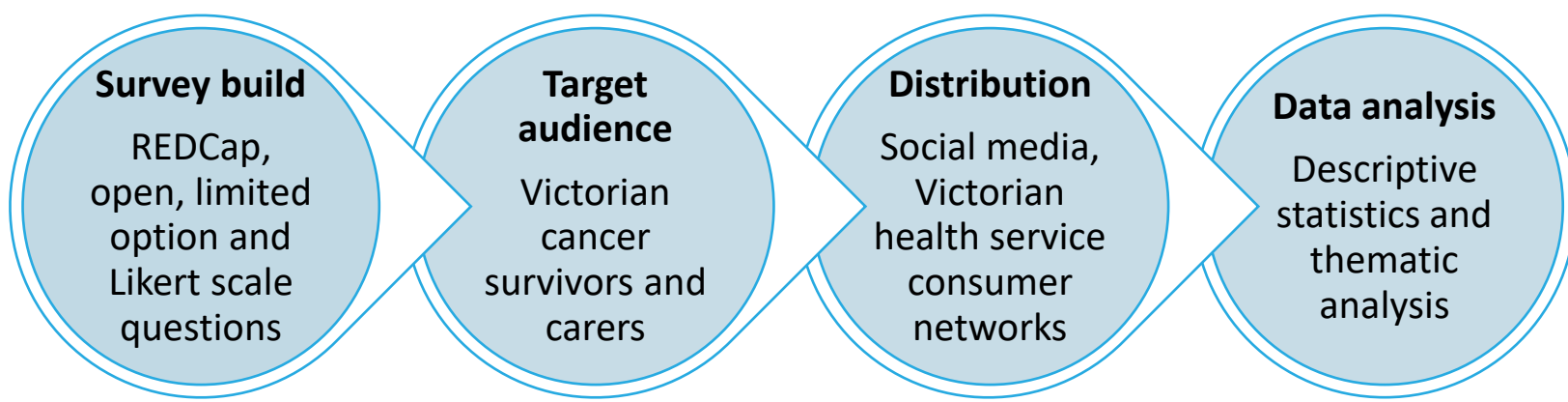
- To support the prioritisation of survivorship care improvement work as part of the ACSC and VICS collaboration, this survey aimed to understand the experience of consumers receiving and accessing cancer survivorship care in Victoria, Australia.

Methods

- A consumer survey was developed based on the ‘process’ domain of the Victorian Quality Cancer Survivorship Care Framework,⁴ which includes 30 criteria across three domains: policy, process and outcome.

- Survey questions related to:

- Demographics
- Type of follow-up care
- Survivorship care plans (SCP)
- Supportive care conversations
- Information provision
- Overall experience



Results

- 69 survey responses were received.
- 72% of respondents received their follow-up / survivorship care at a hospital (Figure. 1).
- Over half did not receive information but wanted to, or wanted to receive more information about the impact of cancer (Figure. 2).
- Most had not been asked by their healthcare practitioner how cancer and its treatment had affected them (Figure. 3).
- 86% did not receive a SCP (Figure. 4), however 74% felt this would have been useful (Figure. 5).
- Themes emerged about the value of health professional and peer support and the importance of supporting the transition to the survivorship phase (Figure. 6).

Conclusion

- The consumer experience of survivorship care could be improved with better coordination of care, more timely access to information and improved access to peer support.
- Findings from this survey have informed subsequent work as part of the ACSC and VICS collaboration, including a health professional poll to prioritise focus areas for the development of survivorship care improvement initiatives in Victoria, Australia.

Demographics

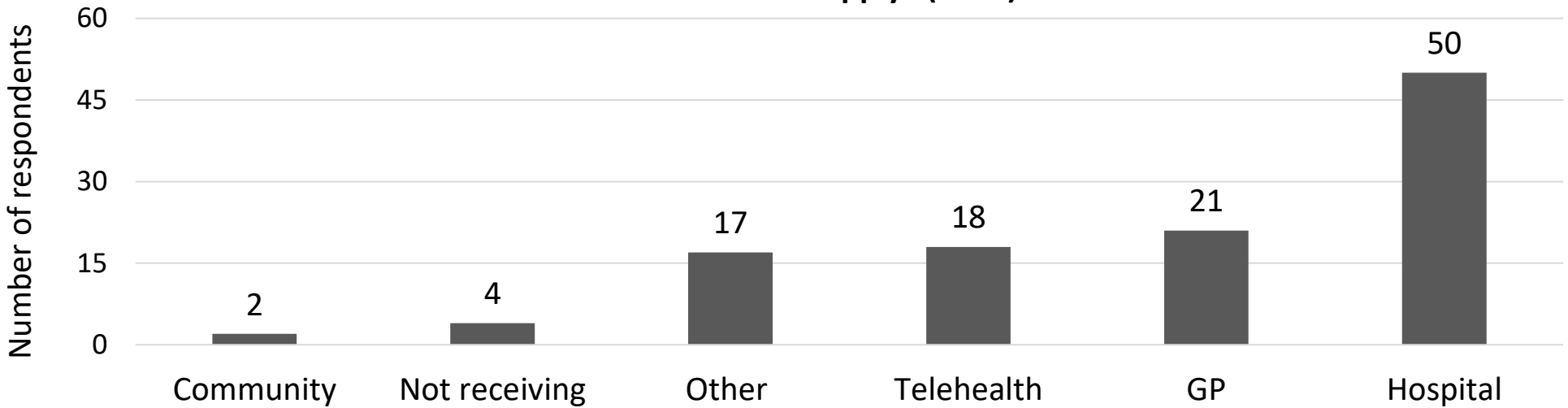
Table 1. Demographic data

Demographics (n=69)		Location of residence	
Type of respondent		Major city*	
Patient	55 (80%)	28 (41%)	
Carer	14 (20%)	Inner and outer regional*	
Gender		41 (59%)	
Female	50 (72%)	Common cancer types	
Male	19 (28%)	Breast	17 (25%)
Age		Head and neck	16 (24%)
Mean	60 years	Prostate	11 (16%)
		Time since completion of treatment (n=58)	
		Less than 1 year ago	17 (29%)
		1-5 years ago	29 (50%)
		More than 5 years ago	12 (21%)

*According to the Australian Statistical Geography Standards (ASGS) 2016

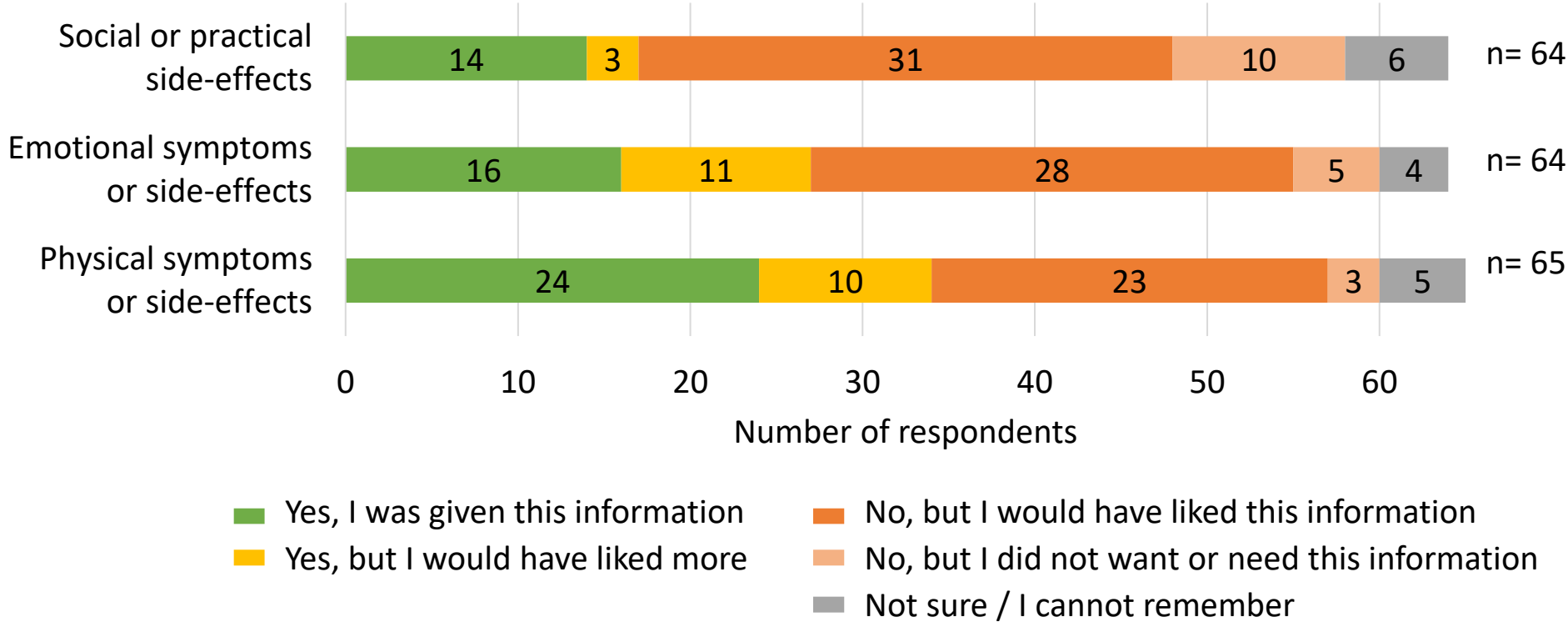
Location of follow-up cancer care

Figure 1. Where do you / where does the person you care / cared for usually receive follow-up care? Select all that apply. (n=69)



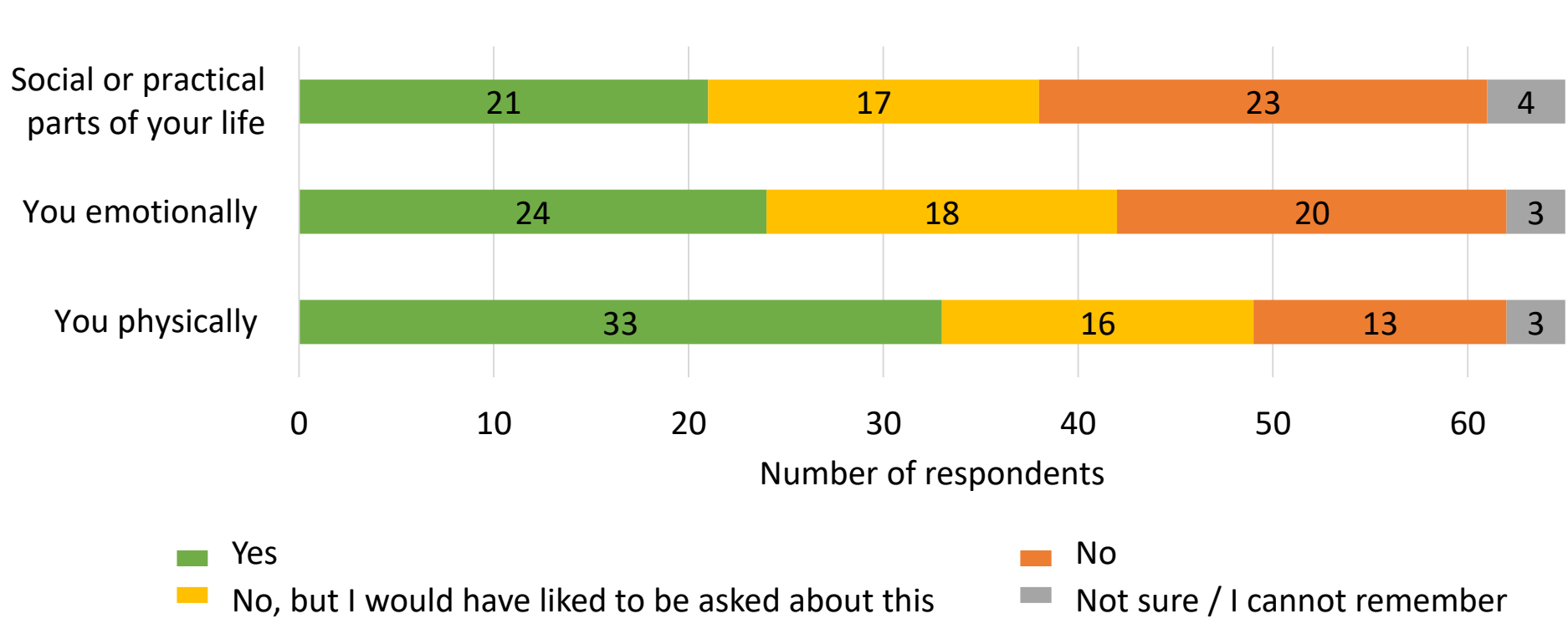
Information provision

Figure 2. Since you finished cancer treatment / in your role as carer, have you been given information (written, online, video) about _____?



Supportive care conversations

Figure 3. Since you finished cancer treatment / in your role as carer, have you been asked about how cancer or cancer treatments may have affected _____? (n=65)



Survivorship care plans

Figure 4. Since finishing treatment, have you or the person you care / cared for received a SCP?

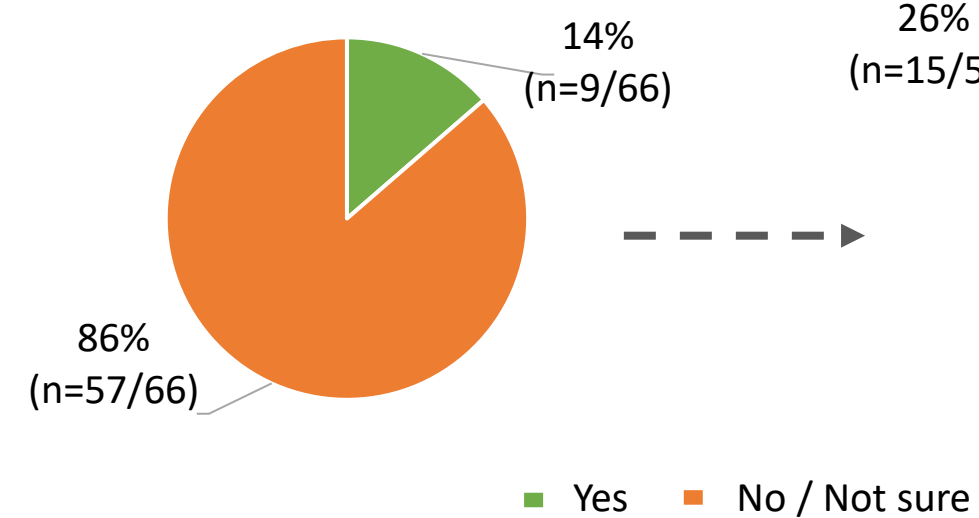
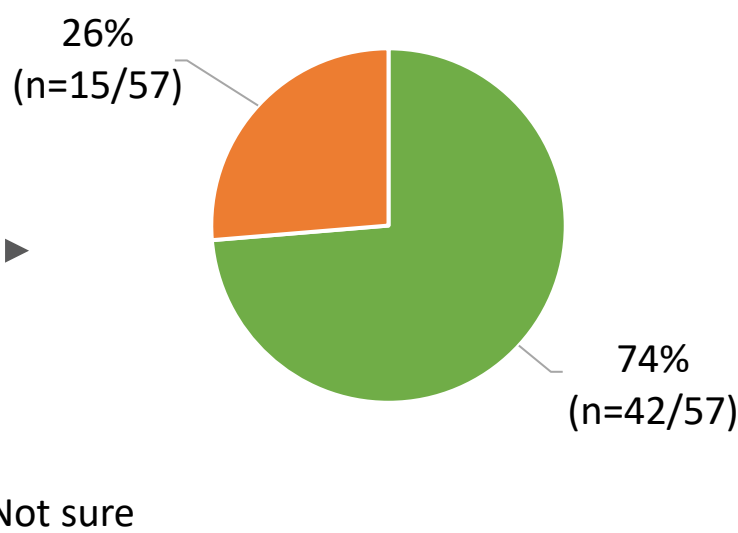


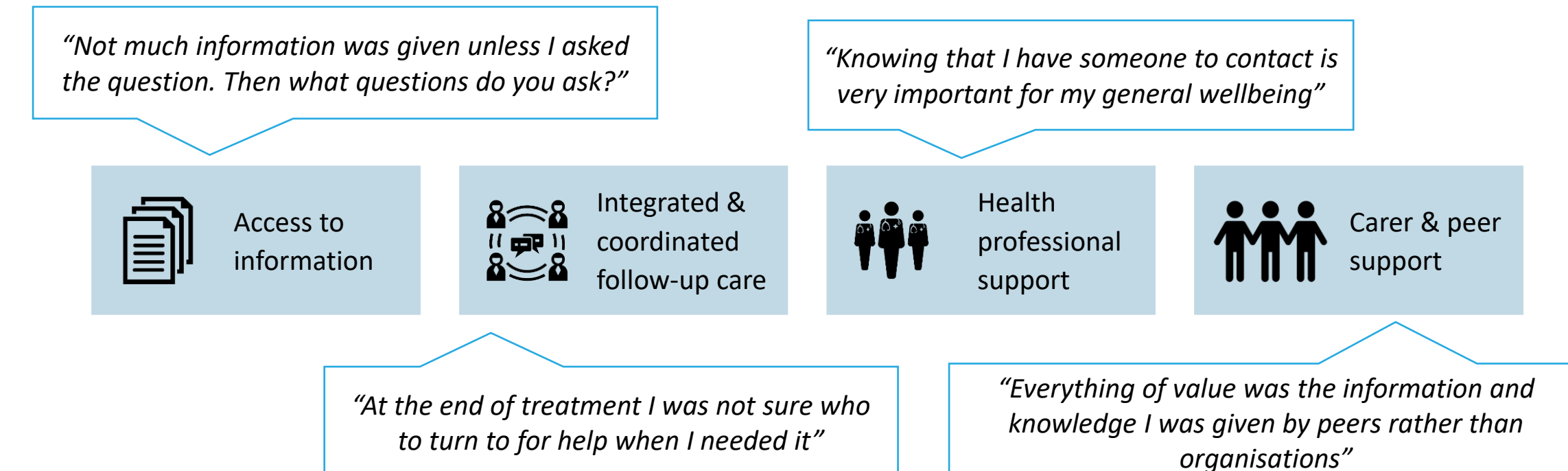
Figure 5. Do you think it would have been useful to receive a SCP?



Open-ended questions: consumer perspectives

Open-ended questions explored the following topics: most helpful part of care; support that was required but not offered or provided; suggested improvements to care and overall experience.

Figure 6. Open-ended question themes



References

- Emery J, Butow P, Lai-Kwon J, Neklyudov L, Rynderman M, Jefford M. Management of common clinical problems experienced by survivors of cancer. The Lancet. 2022 Apr;399(10334):1537-1550.
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