

Implementation of Breast Stratified Follow-up in North East London:

Barts Breast Open Access Follow up

Mr. Anthony Peel
Clinical Lead and Consultant Breast Surgeon

The OAFU Team
Anne Brewer - Project Manager
Jacky Jones – Advanced Nurse Practitioner
Susan Shiel – Data Manager



Open Access Follow-up (OAFU) Patient Inclusion and Exclusion Criteria

Inclusion Criteria

- Breast cancer patients who have been treated with either surgery, chemotherapy or radiotherapy
- Patients on endocrine therapy
- Patients on clinical trials*

*** Patients on clinical trials are eligible for OAFU but should still attend appointments stipulated by trial protocol.**

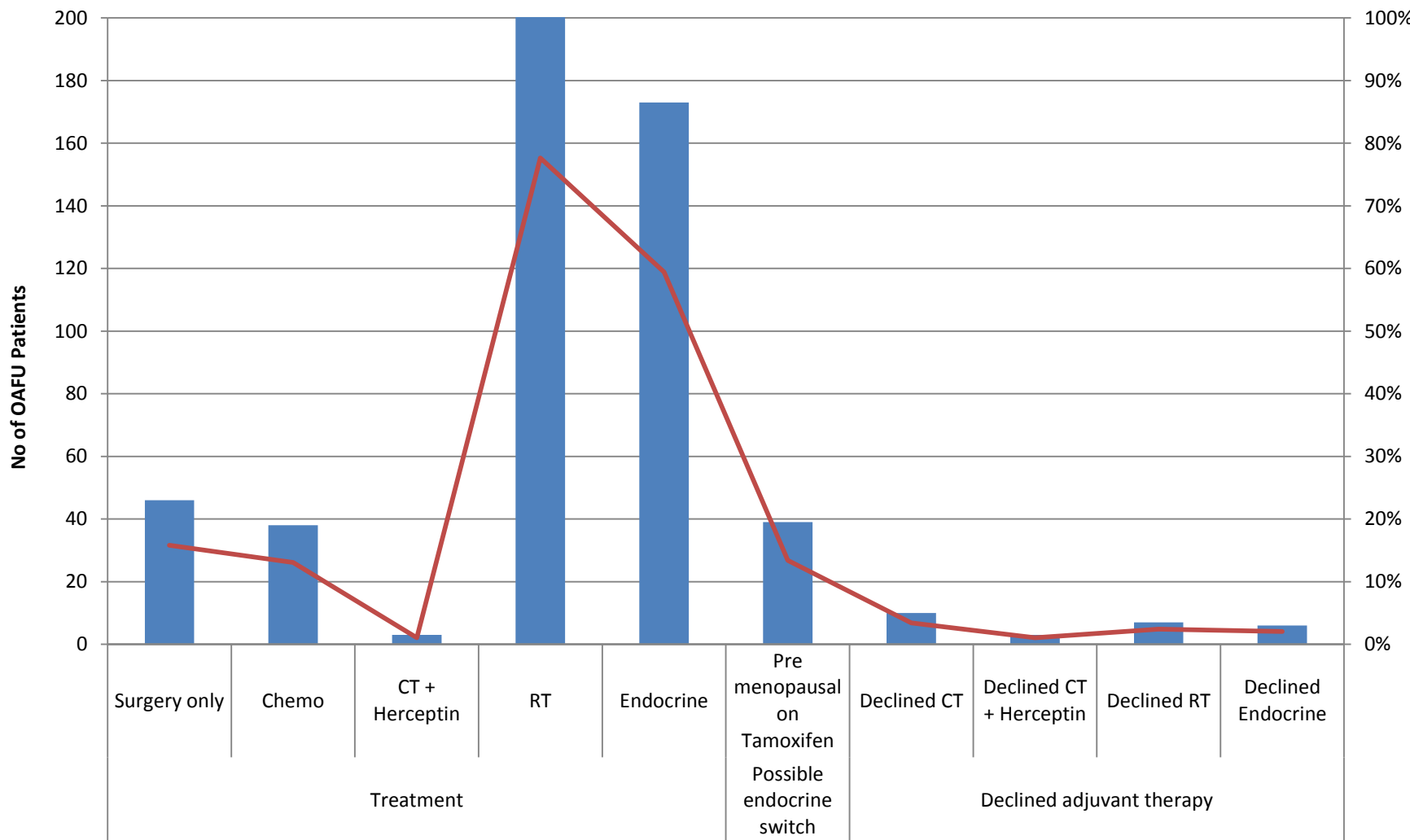
Exclusion Criteria

- Patients with more than four pathological lymph nodes or distant metastatic disease
- High risk patients, i.e. locally advanced, inflammatory disease
- Patients who have confirmed learning difficulties
- Patients who have confirmed mental health issues
- Patients diagnosed below the age of 30 years

All new referrals must be agreed at MDM



Current OAFU patients (as at May 2016) (291 patients) Treatment profile



No of women	46	38	3	226	173	39	10	3	7	6
% of OAFU referrals	16%	13%	1%	78%	59%	13%	3%	1%	2%	2%

Timeline



Following Consultation

- Nurse Practitioner completes eHNA and Care Plan and dictates a summary of consultation and discussion
- Copies of both are sent to patient and GP. GP also receives a copy of the Treatment summary and GP information leaflet.
- Consultation recorded on Somerset and appointments recorded on CRS.
- Treatment summary and Care Plan uploaded onto EPR



Patient Satisfaction Questionnaire

139 sent, 81 responded giving a response rate of 59%

- 95% of patients were confident in knowing whom to contact with any symptoms, queries or concerns
- 90% were confident in managing any ongoing effects of the treatment they had received for their cancer
- 89% of responders were confident about managing side effects of current treatment



“I feel that OAFU is a vital part of cancer recovery. After finishing radiotherapy I felt that's it, back to work and all over - but that's not the case at all. Barts and OAFU is a system in place - which all hospitals should see the need for, they are doing an excellent job.”

“This is a very good service. There is a single point of contact who knows the patient's history and is available to talk to ad hoc.”

“Very thorough, I didn't feel rushed and I came away more knowledgeable, I still feel anxious but, it's comforting to know you're only a phone call way.

