



2019

21 - 23 JUNE

SAN FRANCISCO

SUPPORTIVE CARE
MAKES EXCELLENT
CANCER CARE POSSIBLE

The Enhanced Supportive Care programme

MASCC/ISOO

Annual Meeting on Supportive Care in Cancer

www.mascc.org/meeting

Follow us on Twitter: @CancerCareMASCC



Conflict of Interest Disclosure

Richard Berman FRCP

Has no real or apparent
conflicts of interest to report.



Cancer care in 2019

- Cancer is becoming increasingly specialised with advances in therapy
- The timeline for anti-cancer therapy is getting longer
- Emerging toxicities are diagnosed and treated
- Increasingly patients suitable for critical care admission with a better life expectancy



There are an estimated 2.5 million people in the UK today who have had a **cancer** diagnosis. This is an increase of almost half a million in the previous five years. ... If this number continues to rise by over 3% a year, this could see 4 million people **living with cancer** by 2030.



Overcrowding in emergency department: an international issue

Salvatore Di Somma • Lorenzo Paladino •
Louella Vaughan • Irene Lalle • Laura Magrini •
Massimo Magnanti

Received: 25 October 2014 / Accepted: 10 November 2014 / Published online: 2 December 2014
© SIMI 2014

Abstract Overcrowding in the emergency department (ED) has become an increasingly significant worldwide public health problem in the last decade. It is a consequence of simultaneous increasing demand for health care and a

represents a synopsis of the lectures on overcrowding problems in the ED of the Third Italian GREAT Network Congress, held in Rome, 15–19 October 2012, and hopefully they may provide valuable contributions in the



The burden of cancer on the acute medical unit

Jonathan Berger, Tim Cooksley and Mark Holland

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- 15.3% of patients had a history of cancer
- Increased length of stay
 - (8.8 vs 7.2 days $p < 0.01$)



Review

ONLINE FIRST

FREE

October 03, 2016

Alternative Strategies to Inpatient Hospitalization for Acute Medical Conditions

A Systematic Review

Jared Conley, MD, PhD, MPH^{1,2,3,4}; Colin W. O'Brien, BS⁵; Bruce A. Leff, MD⁶; et al

» Author Affiliations | Article Information

JAMA Intern Med. Published online October 3, 2016. doi:10.1001/jamainternmed.2016.5974

Abstract

Importance Determining innovative approaches that better align health needs to the

2019
3 JUNE
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ARE POSSIBLE

Research Letter

FREE

July 11, 2017

Overall Survival Results of a Trial Assessing Patient-Reported Outcomes for Symptom Monitoring During Routine Cancer Treatment

Ethan Basch, MD, MSc^{1,2}; Allison M. Deal, MS¹; Amylou C. Dueck, PhD⁴; [et al](#)

» [Author Affiliations](#) | [Article Information](#)

JAMA. 2017;318(2):197-198. doi:10.1001/jama.2017.7156

Early responsiveness to patient symptoms prevents adverse downstream consequences.



ESC is an initiative that promotes **proactive access** to Supportive & Palliative Care





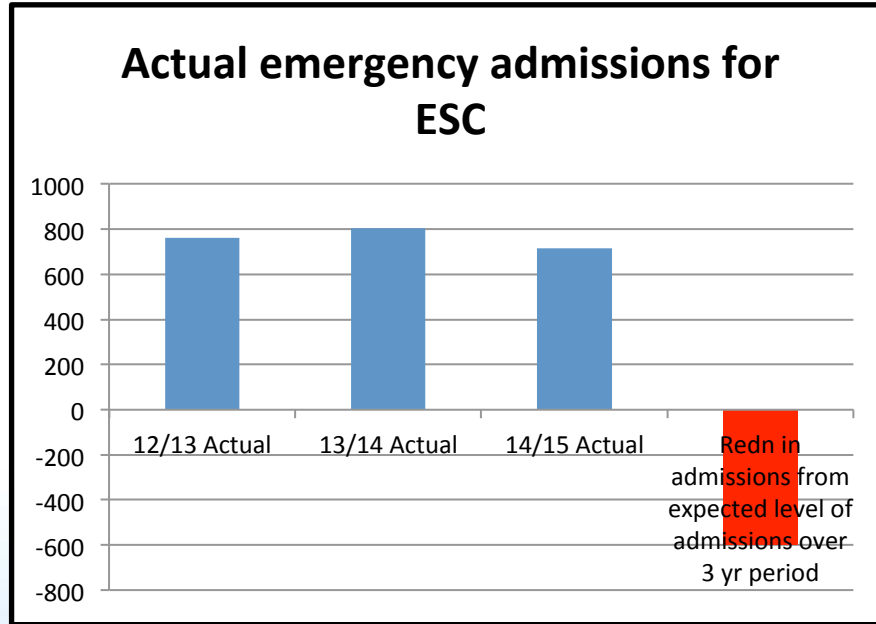
ESC

1. Rebranded: “supportive care team”
2. Patients screened for SC needs in oncology clinics
3. Symptoms identified / dealt with earlier
4. Prevent escalation / reduce admission risk



Financial impact of ESC

Reduction in actual emergency admissions in ESC disease groups compared with expected admissions across 3 years



598



**£1.4 m
(\$1.75m)**





ENHANCED

SUPPORTIVE CARE



6 PRINCIPLES OF ESC

1. Earlier involvement of supportive care services.
2. Supportive care teams that work together.
3. A more positive approach to supportive care.
4. Cutting edge and evidence-based practice in supportive and palliative care.
5. Technology to improve communication.
6. Best practice in chemotherapy care.





20 CANCER CENT ACROSS ENGLAND

Collecting outcomes data for ESC (2016-19)

- CQUIN patient outcome data tool
- *Case studies & research*
- *Local audit and report detail from providers to commissioners*
- *Feedback, reflections and conversations with clinical teams across the last 2 years*
- **National unplanned admissions analysis**



ESC: The national report

(everything we learned about ESC between 2016 and 2019)



Earlier integration of supportive and palliative care within oncology

Every provider

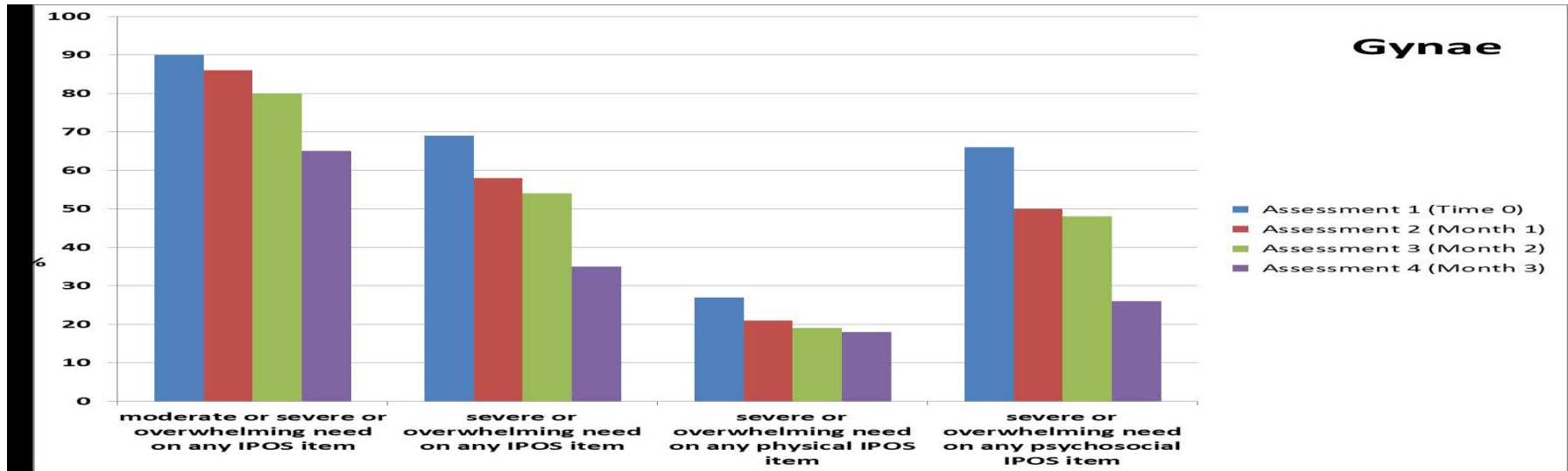
Earlier conversations and planning

ESC can support difficult conversations
around stopping treatment



Better patient experience

- Every provider showed positive changes (reduction) in IPOS scores following ESC assessment or visit, across a range of symptoms



Between 2016 and 2018, a total of 500 unplanned admissions were avoided in eight providers with a conservative saving estimate of £1.95 million (\$2.5m) based on basic admission costs only



Lessons learned – ESC: what were the key ingredients for success?

1. Rebranding
2. A committed clinical lead in each centre
3. Additional funding
4. Support from key managers / commissioners
5. Oncology buy-in
6. Consistent and timely data collection and reporting



ESC:TOX The Christie School of Oncology

Enhanced Supportive Care: Cancer Toxicity Management Conference

Thursday 12th and Friday 13th September 2019
The Stoller Hall, Manchester, M3 1DA

Further Information

Fees
Consultants/ Doctors - £350 (2 days) or £200 (1 day)
Nurses /AHPs/Other - £200 (2 days) or £150 (1 day)

Register <https://2nd-esctox-conference.eventbrite.co.uk>

Email education.events@christie.nhs.uk **Call** 0161 918 7409 **or Tweet** @TheChristieSoO

ESC cancer toxicity conference 2019

<https://www.eventbrite.co.uk/e/esctox-tickets-50964414937>

