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An integrated care model for the management of patients receiving oral anti-cancer agents (OAM) by an advanced nurse practitioner (ANP): Planning and development process

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Background: Oncology has been experiencing an increase in oral anti-cancer medications over the last ten years or more. Due to the potential toxicity of OAMs the monitoring of such patients has largely remained within hospitals. The COVID-19 pandemic expedited changes in healthcare and since March 2020, in one Oncology Department in Ireland, there has been a shift to an ANP-led model of care which utilises virtual assessments. To further improve patient experiences and to increase hospital capacity this study aims to transition this patient cohort to an ANP-led integrated model of care in the community setting.

Methods: A scoping review was performed to determine clinical practices for the monitoring of patients receiving OAM. This review and additional analysis of international guidelines identified recommendations for clinical practice which were collated and a best practice standard was developed. This standard enabled a benchmarking activity to be performed to measure the current level of adherence to best practice by the ANP. To determine the acceptability of ANP-led care and possible transition to an integrated care model, a qualitative study was performed using telephone interviews with patients (n=9) and focus groups via Zoom with health care professionals (n=24).

Results: Using thematic analysis four themes were generated from the data. Reflection on the pre-COVID-19 system demonstrated universal agreement that this should be re-evaluated. The ANP was perceived as being ideally placed to deliver care for this cohort of patients. It was recognised that robust communication with patients and with the multi-disciplinary team was vital for OAM care delivery. There was agreement that an integrated model of ANP-led care had significant benefits and various infrastructural requirements for this model to be effective were identified.

Conclusions: Results demonstrate that the current ANP-led model has already positively impacted patients’ experience with safe care evident in the benchmarking activity. Collating the results enabled development of an integrated model for OAM care. It is anticipated that by piloting this model, patient experiences could be further improved upon.

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An integrated care model for the management of patients receiving oral anti-cancer agents (OAM) by an advanced nurse practitioner (ANP): Planning and development process

Barriers to digital health in patients with head and neck cancer

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Background: Digital health has potential to transform cancer support and empower self-management, yet those who cannot engage in digital health are at risk of exclusion. Patients with head and neck cancer (HNC) face unique challenges with communication (e.g. difficulty with voice or speech) and may benefit from digital health interventions. However, lack of access to devices, low confidence in use technology, and low digital health literacy may substantially impact the uptake of digital health. Little is known about digital inequalities in patients with HNC. This study aimed to identify risks of digital exclusion and barriers to digital inclusion in patients with HNC at a UK cancer centre.

Methods: A cross-sectional survey of patients undergoing HNC treatment, between December 2021 and February 2022. The 22-item survey collected patient demographics (age, gender, ethnicity, level of education, and work status) and assessed the prerequisites for digital devices and internet use: access, skills, confidence, motivation, engagement, and preferences for digital services (e.g. smartphone apps to support cancer treatment). Surveys were completed on paper or a web-based platform. Patient and public involvement representatives contributed to item development.

Results: Ninety-nine surveys were completed. Most participants reported using a smartphone (80%) and the internet (89%). Smartphone use was associated with working age, higher level of education, and higher confidence using devices. A minority used a non-smart phone (16%) or no devices at all (2%). Barriers to internet use included lack of interest, affordability, or poor connection. Fifty-six percent said digital health was important, yet 37% were uncertain about the benefits. Despite 63% using mobile health apps, paper-based information regarding cancer and treatment was the most preferred option.

Conclusions: Whilst patients with HNC had good access to mobile devices and the internet, there is evidence of a digital divide between certain groups. Training, equipment, and support is needed to help patients engage with an innovative way of receiving health information. Further work is planned to establish a programme of digital health to support this patient group, and to undertake a process evaluation of its implementation.

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