OG cancer is recognised as one of the most complex pathways. Patients have some of the poorest outcomes and longest intervals between referral and commencement of treatment compared to other cancers (NHS England, 2019). Early intervention by Clinical Nurse Specialists (CNS) ensures people have a more positive experience of care according to Macmillan Cancer Support (2010) and Patient Navigators (PN) were found to facilitate the patient journey (King, 2016).

What We Wanted To Achieve

- Streamline early part of patient pathway
- Improve the patient experience

What We Did

- We recruited an additional CNS and PN
- Provided earlier access to dietitian
- Established an early nurse-led assessment clinic
- Provided a point of patient contact in Endoscopy
- Introduced a follow-up, support and advice telephone clinic
- Completed patient impact statements
- Improved engagement with out of hospital cancer support and wellbeing services
- Closer engagement with cancer services
- Earlier Holistic Needs Assessment (HNA)
- Ensured timely discussion at MDT

How We Did It

- We completed a service review of 40 randomly selected patients
- We compared two cohorts of patients, 20 patients from 2019 with a single CNS and 20 in 2022 with the additional staff
- Information was obtained from a notes review and Somerset cancer database
- A patient satisfaction survey was completed in 2022

What We Found

- In 2019 20% of patients had a delayed pathway, in 2022 – 0%
- In 2019 30% of emergency admissions were avoidable, in 2022 – 0% emergency admissions
- In 2019 NO pre diagnosis phone calls were made. In 2022 78% of patients were contacted by telephone and had an information leaflet before their first hospital appointment. 40% of patients were discussed earlier at MDT

Our Conclusions

- The recent recruitment of a second CNS and PN demonstrated an improvement in the cancer pathway and patient experience

References