The True NTH prostate cancer survivorship care programme: development and evaluation of a model for delivering follow up care to men with prostate cancer

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Background Over the past few decades, there has been a worldwide escalation in incidence of prostate cancer1. Incidence is highest in countries such as Australia, New Zealand, North America and Western Europe, where testing for Prostate Specific Antigen (PSA) is common practice2. The five year survival rate in developed nations is relatively high3,4, and health services are struggling to cope with the increasing number of men who have completed treatment and require follow-up care. Moreover, studies demonstrate that a range of physical and psychosocial needs which currently are not being met5-7. New sustainable models of service delivery are required to ensure health systems can respond to this growing challenge.

The True NTH Supported Self-Management and Follow Up Care Programme is an evidence based solution which encompasses self-management and remote monitoring principles. Face-to-face follow up consultations are replaced with patient directed, individually tailored care. The initiative is part of the Movember Foundation’s True NTH global programme, facilitated in the UK by Prostate Cancer UK.

Programme model

Bespoke IT platform, facilitating remote surveillance and enabling communication between the man and his health care team

Online needs assessment, monitoring of PSA and provision of information and resources

Survivorship Care Plan with communication of treatment summary and care plan to primary care

True NTH Supported Self-Management and Follow Up Care Programme

System of rapid recall if indicated by PSA, needs assessment or symptoms

Self-management workshop to transition men to Care Programme and introduce resources for self-management

Support worker role as first point of contact for men on the programme

Logic model

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<th>INPUTS</th>
<th>OUTCOMES Activities</th>
<th>Participation</th>
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| New Supported Self-Management and Remote Monitoring Care Pathway | Men referred onto new care pathway | Men with stable disease, who are judged to no longer benefit from face-to-face clinic follow up and are capable of self-managing their follow up care | Men take active role in management of prostate cancer follow up (undertake PSA as required; track results; complete IRA).
| Funding for a support worker role as part of multi-disciplinary team | Enrollment of men on IT platform | Delivery of self-management workshops | Men take active role in addressing unmet needs (identify problems; work out strategy to ameliorate problem; set goals; implement strategy).
| Staff training to run self-management workshops | Delivery of personalised care through HKA and care planning and access to advice and support from HCPs | Men have increased knowledge and understanding of self-management, signs and symptoms to alert to clinical team; how to access help and support; benefits of healthy lifestyle for survivorship | Men have increased skills to self-manage.
| Bespoke IT platform to facilitate care pathway | Project management to implement care pathway | Supported self-management and remote monitoring evidence base | Men know how to contact their clinical team | Men feel more in control of their health and empowered to participate in their health care.
| Monitoring of PSA by Clinical Nurse Specialist in virtual clinics | |

OUTCOMES

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<th>Short term</th>
<th>Medium term</th>
<th>Long term</th>
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| Men take active role in management of prostate cancer follow up (undertake PSA as required; track results; complete IRA). | Men take active role in addressing unmet needs (identify problems; work out strategy to ameliorate problem; set goals; implement strategy). | Improved prostate cancer related quality of life and emotional wellbeing.
| Men have increased knowledge and understanding of self-management, signs and symptoms to alert to clinical team; how to access help and support; benefits of healthy lifestyle for survivorship | More men set goals to improve health behaviour | Improved health behaviours.
| Men know how to contact their clinical team | More men satisfied with follow up care | Reduced health service use.
| Men have increased skills to self-manage | |

Evaluation design

Baseline questionnaire - 4 month questionnaire - Staff and patient interviews - Extraction of medical record and programme coverage data

Evaluation aims i) to compare key outcomes for men in the Care Programme with men who have received clinic based follow up care; ii) to compare costs of the Care Programme with clinic based follow up care at both service and patient level; iii) to document health care professionals’ and patients’ experiences of follow up care iv) to document processes which promote or inhibit the Care Programme’s implementation.

Evaluation methods Outcome evaluation using a controlled cohort design with pre- and post-test measures. Key outcomes are general and cancer specific quality of life; unmet needs; fear of recurrence; anxiety and depression; skills for self-management; healthy behaviour change; satisfaction with follow up care. Embedded health economics and process evaluations are also being conducted. Setting Men are recruited from four regional cancer centres in the UK where the Care Programme is being implemented.

References


For more information, contact Jane Frankland: j.l.frankland@soton.ac.uk

For information about True NTH, see: https://uk.movember.com/news/7593/introducing-truenth/?search-scope=local&category_id=1 or http://prostatecanceruk.org/for-health-professionals/our-projects/truenth

Cancer Survivorship and End of Life Care Research Group www.southampton.ac.uk/healthsciences