

Standardization of a Psycho-Oncology Model of Hospital and Community Care Using the Hub & Spoke Model



TYPE	Implementation	LAST	March 2021	IRELAND • NATION-WIDE
STATUS	Implementation is ongoing	UPDATE		Hospital/Community • Psycho-Oncology

PROBLEM & OBJECTIVE

PROBLEM Psychosocial distress is common in cancer patients.

OBJECTIVE This measure seeks to implement a national Psycho-Oncology service for cancer patients and their families.

KEY COMPONENTS / STEPS

- Inclusion of Psycho-Oncology as a core aspect of cancer services 2017 – 2026
- Appointment of a National Clinical Programme Lead in Psycho-Oncology (December 2018)
- Publication of a Model of Care for Psycho-Oncology in Ireland completed in September 2020
- Best Practice Guidance for community cancer support centres and services published in August 2020 (standards include Delivery of Core Services, Governance, Adherence to Professional Conduct & Ethics, NCCP Psycho-Oncology Model of Care, Assessing outcomes and impact)
- Pilot peer review project currently being completed for self-assessment of best practice guidance in 10 cancer support centres with national roll out of annual self-assessment and peer review planned thereafter
- Funding secured for 8 posts in Psycho-Oncology multi-disciplinary teams (MDTs) in 2020 and a further 14 posts in 2021 across the four relevant disciplines of psychiatry, psychology, social work and nursing
- Development of an integrated patient pathway
- As a response to COVID-19, a national helpline was set up to support cancer patients and their families to cope with the added distress of isolation and reduced services due to the pandemic. This was a collaborative effort between statutory and the voluntary and charitable sectors

KEY CONTEXTUAL FACTORS

- As part of the National Cancer Strategy Ireland 2017 – 2026, the National Cancer Control Programme (NCCP) is tasked with developing a Psycho-Oncology service using a Hub and Spoke model providing fair and equitable access to all cancer patients and their families. The remit is national.
- The NCCP, the Health Service Executive (HSE), the Irish Cancer Society, and voluntary and charitable organisations involved in community cancer support are all involved.

MAIN IMPACTS / ADDED VALUE

- Recognition and validation of psychosocial distress as part of the cancer experience
- Early intervention for psychological distress in cancer which reduces the burden on acute services
- Delivery of psychosocial and psychological support to cancer patients in a fair and equitable manner
- Normalisation of the experience of distress in cancer which lessens social isolation
- Emergence of a more comprehensive and cohesive cancer support network across acute, voluntary and charitable sectors

LESSONS LEARNED

- Inclusion in National Cancer Strategy is key to implementation
- Partnership with key stakeholders in the acute, voluntary and charitable sectors are important
- Development of key performance indicators to measure outcomes is essential
- Key barriers include:
 - poor awareness of the extent of psychological distress experienced by cancer patients
 - lack of understanding of Psycho-Oncology as a discipline
 - value of the service poorly promoted to patients by key health personnel
 - possible stigma of mental health difficulties experienced by cancer patients

CONTACT

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