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How can I improve cancer services for people with dementia?

Tips and guidance on making cancer services more responsive

People with dementia have poorer cancer outcomes than those without, and are more likely to experience complications and poorer overall survival (McWilliams et al 2017). Few interventions are designed for older people with cancer and complex needs, such as those with dementia (Farrington et al 2022).

Farrington et al (2022) identified what was difficult for people with dementia having cancer treatment, including:

- » Long waiting times.
- » Seeing multiple doctors and nurses.
- » Coordinating care and treatment of dementia alongside cancer treatment. And what helped, including:
- » Support from a clinical nurse specialist.
- » Ability to choose appointment times.
- » Having treatment at home or at an outreach centre. A service should be responsive. Responsiveness describes

how health systems can identify and meet each person's needs (Mirzoev and Kane 2017). To ensure that an outpatient cancer treatment service for people with dementia is responsive, we recommend following 'CLEAR' steps.

Needs, expectations, preferences and goals should be clarified with patients and caregivers early on, for example using Holistic Needs Assessment (Doyle and Henry 2014) or CHAT&PLAN (Corbett et al 2020).

Services should reflect principles of personalised

CLEAR steps

- » Clarify needs, expectations, preferences and goals
- » Legitimise these as valid
- » Enable these to be met by implementing strategies
- » Audit to ensure this is working for the patient, caregivers and health service
- » Record for the future

care (NHS England 2022) so these needs remain central.

Strategies will vary between settings based on needs identified and resources available – from simple interventions like contacting patients before treatment to assess specific needs (Farrington et al 2022), to large-scale projects like specialist onco-geriatric services (Gomes et al 2020).

Responsive services

Auditing performance allows a service to see whether it is doing what it set out to do. Having to repeat information to different healthcare professionals can be frustrating (Farrington et al 2022) and better documentation helps.

To be responsive, outpatient cancer services should:

- » **Be prepared:** know when people with dementia are attending the hospital. Is there anything specific they need?
- » **Offer continuity:** try to ensure that the person with dementia is seen by the same healthcare professionals.
- » **Use specialist support:** ask for support from Admiral Nurses, specialist practitioners or doctors who specialise in treating older people.
- » **Be flexible:** ask whether having an appointment at a specific time would help. If a caregiver has to attend an appointment, be willing to change arrangements.
- » **Allow staff to think beyond cancer:** consider how conditions like dementia can be accommodated.

By understanding what people with dementia and cancer need, and finding innovative ways to meet these needs, we will begin to develop cancer outpatient services that are dementia-friendly (Alzheimer's Society 2022).

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This is an abridged version of an article at rcni.com/cancer-services-dementia

Find out more

Alzheimer's Society (2022) Dementia-friendly Communities. www.alzheimers.org.uk/get-involved/dementia-friendly-communities

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