

“Supportive Care makes excellent cancer care possible” *Multinational Association of Supportive Care in Cancer, 2015*



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## Supportive Care Services



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## Service Overview

This section highlights the work of a number of teams whose role is to maximise recovery and well-being, and to enable both patients and carers to cope with the impact of cancer and undergoing treatment. They work alongside the Christie oncologists and link with a network of supportive care services in other acute trusts, community and hospices across Greater Manchester and Cheshire.

Services are available to outpatients as well as those staying in the hospital, and at all points in the pathway of care. This begins soon after diagnosis through treatment and into follow up. Preparation and support for ‘living with and beyond cancer’ or ‘survivorship’ is now recognised to be an important part of cancer management, in which The Christie as a specialist cancer centre plays a leading role.

The following sections describe the work and achievements of the following teams:

Specialist palliative care and symptom control  
Specialist pain  
Psycho-oncology  
Rehabilitation  
Complementary therapies  
Information services  
Chaplaincy

In addition to clinical services, these teams have a significant role in education, both within

The Christie and as part of Manchester Cancer, and also make a contribution to research. Their work is described in relation to the three elements of cancer pathways:

- ***Enhanced supportive care through treatment***
- ***Survivorship beyond cancer***
- ***Living with cancer: for some, progressing disease and end of life care***

Working alongside the Christie oncologists, these teams provide award-winning, excellent care within the Christie, and link with a network of supportive care services in other acute trusts, community and hospices across Greater Manchester and Cheshire.

## Key facts about Christie supportive care

*We provide leadership to two of the cross cutting groups within Manchester Cancer; Dr Wendy Makin and Carole Mula were appointed as Pathway Directors for Living With and beyond cancer, and Palliative and End of Life Care respectively In January 2014*

*The Christie information centre supports over 10,000 people each year*

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*Our dementia nurse Lorraine Burgess has been awarded the Nurse of the Year award, in recognition of her lifetime of commitment and passion to nursing older adults with mental health issues- well done Lorraine!*

*inpatients across the wards at The Christie at any one time*

*Over 300 patients and carers made use of the drop in memory clinic during the past year*

*Multiple media appearances during 2014 on national TV, radio and newspaper articles on a variety of themes relating to supportive care*

*The complementary therapies team in 2013-14 provided over 13,000 treatments, including massage, aromatherapy, acupuncture / acupressure, reflexology, therapeutic touch, hypnotherapy, creative visualisation, mindfulness, smoking cessation and alcohol advice. They engaged with over 2,500 patients, carers and staff for smoking cessation advice and support in 2013-14.*

### Enhanced supportive care through treatment

### Information Support Services

*It has been an exciting year for the Christie pain team which has now integrated with palliative care and symptom control to create a single pain and symptom control team.*



*Recognition through an ESMO (European Society of Medical Oncology) award in 2014 for successful integration of palliative care within oncology in a cancer centre.*

The Christie Information Centre offers free, confidential information, advice and support to patients, carers and professionals. **Annually the centre supports over 10,000 people** with 85% of this being face to face contact and the remainder by phone/email. The centre is staffed by a nurse manager and information support coordinators who can provide a drop in service with supportive listening and signposting of the visitor to the appropriate specialist help such as clinical nurse specialists or their oncologist, and some to psycho oncology and complementary

*Some weeks, the palliative care and symptom support team are supporting almost 25% of*

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therapies. Where appropriate, the centre visitors may also be directed to local and regional services. As the staff work closely with the benefits team and the employment support team visitors can be offered emotional, practical and financial support promptly in a ‘one stop centre’.

The Information Centre has a comprehensive range of information covering Macmillan Cancer Support, Breast Cancer Care and the major national charities, Christie publications, support groups and local services. Information is available in other languages and for people with learning difficulties.

### Wellbeing and self-confidence support

Sometimes people are reluctant to come into a centre and ask for assistance. Those who will undergo temporary hair loss will obtain vouchers for a free wig from the Information Centre staff who can use this as an opportunity to make the person aware of other services that are available. They can be offered a complimentary ‘pampering’ session, or may be directed to ‘Headstart’, a volunteer led service that provides headwear and demonstrations of how to use them. The wig fitting service is a commissioned service and its staffing is provided by an external supplier and supplies around 900 wigs to patients each year.

Staff manage ‘Look Good Feel Better’ and ‘Colour Me Beautiful’ which are complementary services to promote positive body image and raise self-esteem in people who are coping with the illness and treatment. There is also an art class which is well attended by patients who find this group therapeutic and supportive whilst allowing them to be creative. Work created by this group has been successfully exhibited in exhibitions across the North West and in Guernsey. The benefits from the art group are being formally evaluated by a volunteer attached to the psycho-oncology team.

We are developing the service to take it directly to people such as into out-patient clinics, so that they can also be provided with this support even if they do not come into the Information Centre.

### Benefits advice service

Patients are able to see advisors to address their financial and practical concerns on a drop in basis or via an appointment system. **Each quarter the team will support an average of 250 new cases and the majority of clients are in the 26-59 age groups.** Nearly 40% of the clients are in the ‘short term sick’ employment status meaning that they have been out of work for less than 12 months at their initial point of contact. Personal Independence Payment (PIP) is the highest of the individual recorded welfare benefit cash gains accounting for almost half of the £1

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million gained each quarter for clients. Staff will also support clients to access other funds from a wide variety of charity sources such as Macmillan grants, The Lighthouse Charity or Electrical Industries Charity.

Common concerns identified by clients include; lengthy delays with PIP claims being processed under ordinary rules, issues with ‘bedroom tax’; or under occupancy, fuel poverty and people unaware of their entitlements and a reluctance to apply for these as they see them as ‘charity’. Staff are able to clarify people’s entitlements, support them to explore other options such as charity funds and deal very sensitively with client concerns to achieve a positive patient experience.

*“The staff member was extremely helpful, sensitive and understanding as my Mum’s diagnosis came as a massive shock. At the time we were unclear that there was any help available”*

### **Complementary Health & Wellbeing Services 2013/14**

As an integrated service within the rehabilitation unit, the team led by Peter Mackereth and Jacqui Stringer offer a range of therapies, all free of charge to patients and carers. There is increasing demand for what they have to offer: **In 2013-14 we provided**

**over 13,000 treatments, including massage, aromatherapy, acupuncture/acupressure, reflexology, therapeutic touch, hypnotherapy, creative visualisation, mindfulness, smoking cessation and alcohol advice.** The service is provided by therapists working on a part-time sessional basis covering Monday – Friday.

Our team also contributes to Staff Health and Wellbeing events/services, the Survivorship Project and cancer awareness work with the local LGBT community.

### **Awards/Nominations 2013/14**

2013 Complementary Therapy Team Runner-Up The National/International Education Award The Christie

2013 Complementary Therapy Team Runner-Up College of Medicine Innovations Award

2014 The CALM Service Best Practice Winner Federation of Holistic Therapist

2014 Finalist ‘Integrated Approaches to Care’ *Nursing Times*

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### Smoking Cessation & Alcohol Advice Services

**The complementary therapies team engaged with over 2,500 patients, carers and staff for smoking cessation advice and support in 2013-14.** The team provides advice and treatment sessions, which can include hypnotherapy, reflexology, aromatherapy and relaxation techniques, to help patients, visitors and staff to stop smoking and remain smoke free. These therapies can be used alone or combined with acupuncture. Peter Mackereth regularly contributes to BBC Breakfast TV and Radio on smoking cessation debates and news items.

### The CALM Service - complementary therapies team

This award winning service is provided for patients who are struggling with difficult procedures such as radiotherapy (particularly head and neck patients), needle anxiety, MRI scan, and surgery. For those patients who require support the therapist will either attend with the patient during the procedure or teach the patient techniques that they can use themselves. In 2014 we completed an evaluation project with patients and carers, with papers accepted/ published



Patients who have to cope with weight issues are offered group sessions by the complementary therapies team on Monday evenings to help them overcome the practice of consuming comfort foods in response to emotional feelings instead of hunger. This project is the focus of an audit, which we plan to report on in 2015.

### Psycho-oncology support

The psycho-oncology service led by Dr Hawthorne is available to inpatients and outpatients, providing a range of expertise, including psychiatry, psychology and counselling using a range of approaches that are provided by the team and are particularly tailored to the needs of people who experience cancer, and their carer's. Last year the team responded to nearly 400 ward referrals and the outpatient clinic received over 600 referrals.

*“I feel supported and cared for, that how I feel matters, and the issues I've faced are real – the outside world doesn't understand how*

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*illness can affect you mentally, or how day to day living can be hard to face. The psycho-oncology team understand and do all they can to help. I'm very thankful they have been there for me.”*

*“I think it's an extremely important part of a patient's treatment plan. Cancer hits both physically and without doubt emotionally. I feel patients should be given both treatment for their physically illness and treatment for the emotional toil they find themselves in. It's very hard to admit you need help but having the help sorts out such a great deal out. I think it should be offered in the same way as drugs to treat the illness.”*

The team have developed new approaches within The Christie in response to the challenges of confusion, memory problems and alcohol dependency.

The complexity of the cancer illness, other co-existent medical problems and treatment toxicities can lead to acute confusion. In addition, the frequency of cancer in the older population has meant that staff at The Christie, as with other hospitals, needs to be aware of those with memory problems. The cognitive screening programmes in the Head and Neck clinics and pre-operation assessment clinics have established that the level of dementia in the over 75s is the same as the general population.

Jonathan Parker (occupational therapist with the psycho-oncology team) has set up a database which will provide the first UK data of clinical outcomes for patients with dementia having cancer treatment. The project has provided the impetus for developing pathways for patients with dementia and delirium in the trust, with the aim of early identification and appropriate intervention and support. The new electronic patient record system will ensure patients on the ward will be routinely assessed for confusion, and have an individualised care plan.

Following innovative work, two dementia posts have secured substantive funding, which will enable further developments. The lead nurse **Lorraine Burgess received the Nurse of the Year award 2014, in recognition of her lifetime of commitment and passion to nursing older adults with mental health issues.**

From 2013 a 'Memory Clinic' began in the Christie conservatory on Wednesday afternoons. This memory drop in service provides advice and support for anyone, whether patient, carer or staff, who is affected by memory problems. It is supported by the dementia nurse specialist and complementary therapies team. Patients and carers can receive a free massage along with other advice and information about memory concerns. **Over 300 patients and carers called in during the past year.**

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Some people may have problems associated with alcohol use and experience additional difficulties when faced with a cancer diagnosis. Two members of the psycho-oncology team have developed a support pathway for these individuals. This ensures they have timely access to help and support as they go through their treatment.

***In 2014 the team moved to a new and improved suite of rooms within The Christie which are more versatile in use and easier for patients to access. The suite includes a Christian chapel, a prayer room equipped for Muslim prayers, a new multi-faith room, and a team office.***

### Chaplaincy and spiritual care

The Chaplaincy/Spiritual Care team exists to provide spiritual and religious care for the whole Trust community: patients, their visitors, staff and volunteers. The team works across faith and denominational boundaries as far as is appropriate, but also respects the need for input from patients' own faith groups.

The team consists of three part-time Christian chaplains on staff (including the Chaplaincy Coordinator) who are supported by Christian, Muslim, Jewish and Buddhist honorary chaplains. They regularly visit the wards and in addition respond to referrals from staff and patients: last year there were 180 of these additional requests for support, including some urgent referrals to which the team responded, at any time of day or night.

Christie chaplains facilitate weekly worship in the chapel and have introduced a monthly prayer and meditation service, 'Sacred Space'.



### Pain and symptom support

Cancer itself leads to a wide range of symptoms. Pain and troublesome symptoms may be side effects, usually short term, from the treatments that people need to undergo. In a smaller number of people these may persist.

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### Specialist palliative care and symptom support

The Christie palliative care & symptom control team provides essential specialist support for patients going through cancer treatment, as well as for those where anti-cancer treatment is no longer being given. It is led by Carole Mula, nurse consultant and supported by Dr Richard Berman and Dr Wendy Makin, consultant physicians in palliative medicine. The team comprises nurse specialists, a dedicated pharmacist and sessions from GPs who provide a valuable perspective across hospital and community.

Ward staff make between 150 to over 200 referrals each month and over 95% are seen within 24 hours of the referral. **Some weeks, the palliative care and symptom support team are supporting almost 25% of inpatients across the wards at The Christie at any one time**

In 2014 more than 500 referrals were made to the pain and symptom clinic in addition to the patients seen jointly in other clinics together with the oncology team.

- Our team of specialist palliative care doctors and nurses provide expert advice and support to help manage cancer pain and difficult symptoms, using the most up-to-date treatments.

- Working alongside the oncology and surgical teams at The Christie, the team provides care at every stage, encouraging early involvement so that problems can be picked up early and managed promptly and efficiently
- Completion of inpatient experience of palliative care survey (November 2014) - with positive results – 92% felt their needs /symptoms were met/resolved appropriately – *“I think the Specialist Palliative Care team is first class and is to be commended for their help & support we as patients receive. It is invaluable and helps us as patients to feel part of the team also and not just a number or a face in a crowd.”*

In 2014, the service was extended to full seven day working to ensure continuity of support especially to patients on the wards and their families. Over the past few years palliative care nurse specialists have worked with oncology teams in targeted clinics **to develop an integrated model of earlier supportive care. This received recognition through an ESMO (European Society of Medical Oncology) award for successful integration of palliative care within oncology in a cancer centre.**

*“Having the palliative care team in our clinic has been hugely beneficial, ensuring that complex patients are properly assessed and managed, but also ensuring this is coordinated*

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*with the patients' community team. The objective evaluation of our progress at regular intervals has been rewarding as we can see we are making progress. I have no doubt that joint working has led to better patient care. Not just glowing words – I really mean it!! This has been a great initiative.”* **Professor Juan Valle – Consultant in medical oncology**

### Specialist Pain Service

- The acute pain service supervises the care of patients undergoing surgery on site and is led by Dr Carel van Oldenbeek with support by acute pain nurse specialists. The acute pain team has this year developed and rolled out an educational package for ward nurses looking after patients with epidurals and patient-controlled analgesia devices. Acute pain guidelines have been updated and revised.
- In 2014 Dr Julian Scott-Warren, consultant pain specialist, was appointed to replace Dr Bhaskar as lead for the Christie chronic pain service, as well as providing input to acute pain management. Treatments include use of Quetenza (capsaicin plasters) for painful peripheral neuropathy, PENS for persistent scar pain in addition to a range of interventions for troublesome cancer pain.

The opportunity has arisen for Christie to become one of 3 centres in the UK to offer

percutaneous cervical cordotomy. This is an extremely valuable interventional pain technique designed to provide significant symptomatic relief to patients with pain from advanced cancer. The procedure is currently performed in 4 centres across the UK, but the loss of two of these centres is imminent, including Oldham, and The Christie will be a regional centre for this service.

***It has been an exciting year for the Christie pain team which has now integrated with palliative care colleagues to create a single pain and symptom control team.*** This unification of expertise represents a unique approach in UK cancer care, and allows us to collectively provide a much more holistic, integrated and team-based approach to helping Christie patients, working alongside all oncology specialist teams and across all clinical areas.



The expanded weekly pain and symptoms support clinic is held jointly by the pain consultant, the palliative care consultants (including our nurse consultant) with support

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from nurse specialists, our complementary therapies team and a dedicated pharmacist.

*Other teams play an important part in symptom management*

The psycho-oncology team provide expertise especially where there is associated anxiety, agitation and distress or mood change; the complementary therapies team can offer help to patients and carers through relaxation techniques as well as help with specific problems such as fungating wounds, mucositis and radiotherapy reactions by aromatherapy creams and lotions.

The rehabilitation teams provide ward-based fatigue classes each week to advise and help inpatients, and to offer strategies to cope with this common problem. They also provide valuable assistance in managing pain that is triggered by, or limits, movement and position.

The involvement of these different teams to support a patient and carers is co-ordinated via a weekly multidisciplinary meeting where patients with complex problems are discussed.

### **Survivorship beyond cancer**

Completion of all the planned cancer treatment is an important milestone to reach, but one that can leave the individual feeling lost and

anxious. There will not be such regular contact with the oncology team. There are expectations from family and others that they should 'get back to normal' including work, when for many life will not be the same as before. There may be adjustment to physical changes from treatment and the cancer itself, and an emotional challenge including having to cope with uncertainty about the future.

### **Rehabilitation and recovery**

The Rehabilitation Unit is the base for the physiotherapy and occupational therapy teams, led by Kathy Pantelides. They provide one of the few assessment and treatment services in Greater Manchester, which advised and treated over 300 people affected with lymphoedema because of a cancer diagnosis or following treatment. These are seen by two key workers with two specialist therapies. Most commonly lymphoedema causes swelling in one or more limbs. The Christie service is also able to treat complex situations, including those affecting the head and neck, breast and genital areas. Our key workers visit the Christie radiotherapy satellite centres at Salford and Oldham each week.

The team has run three cancer rehabilitation programmes in the last year which is a new development and different models are being tested. Topics cover physical activity, fatigue, relaxation, stress and healthy eating. Two of the programmes were education based and run over 5 weeks. They provided sessions on

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physical activity, fatigue, relaxation, stress and healthy eating. The programmes differed in that referral into one programme was from health care professionals and the other was self-referral by the patient. The third programme was in collaboration with Salford Royal NHS foundation trust and tested the integration of both cancer and cardiac patients into an 8 week programme. There were major benefits were around the reduction in the stress and anxiety scores for the Christie patients, who had undergone treatment for prostate cancer, but it was important for them to have session provided by the urology cancer CNS to cover cancer specific concerns and education.

**A poster describing the experience of integrating cancer with a cardiac rehabilitation programme was presented at the International Urban Health conference in March 2014**

### Psychological adjustment

A new support group 'Life after cancer treatment' - has been established and evaluated by the psycho-oncology team in the past year which is aimed at those who have recently completed treatment. The end of treatment can be a stressful time for many and when they start to process the emotional impact of cancer. Timely support at this critical time can help avoid the subsequent development of mental health problems. The

group has been very positively rated by those attending.

*“ It’s hard to explain to someone who has not had cancer, the impact it has on you. Being with people who had gone through a similar process really helped”*

*Comment from a patient after attending the Life after Cancer group*

### Returning to work: Vocational Rehabilitation and Guidance Service

This service was developed from a very successful pilot initiative supported by the Shaw Trust and Macmillan Cancer Support. It is provided by two full time vocational specialists based at the Christie who have extensive experience in assisting people to negotiate the barriers to returning to work. Cancer vocational rehabilitation takes place on a number of levels ranging from general information to skilled one to one interaction with individuals who have complex employment problems as a consequence of their illness. There a fortnightly free employment law 'surgery'. To date this award winning service has responded to 1274 referrals:

- **395** patients have returned to work following direct support

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- **380** patients have been provided with information to support self-management in their return to work
- **131** patients have been helped to retain their current role despite difficulties post treatment
- **69** patients are now being supported by 'Work Choice' to go back to work
- **49** patients supported back into education/training
- **100** patients supported into early/medical retirement
- **30** patients supported to gain voluntary work

The teams are able to advise clinical staff around current employment issues and patient's rights at work and in addition will guide employers to be able to support someone with a cancer diagnosis.

### **Coping with the later consequences of treatment**

A number of staff provide expertise in supporting cancer survivors, who may still find it hard to adjust to the impact from the effects of cancer and the treatment. Some are referred to the pain and symptom clinics or psycho-oncology clinics. Acupuncture which may be useful for later side-effects from

treatment, such as hot flushes, neuropathy and fatigue. Last year the complementary therapies team completed studies on acupuncture and fatigue and have obtained funds to evaluate acupuncture for peripheral neuropathy from 2015. The endocrine unit provides expertise in some of the more complex effects and provides a service to monitor bone health. The wide range of potential problems that may be faced by people with different cancers has brought together our oncologists and supportive care teams to develop cancer survivorship at The Christie which is described in the next section.



### **Development of cancer survivorship services**

A small steering group of staff and patient representatives has developed into a Survivorship Network at The Christie. This supports projects for "Living With and Beyond Cancer" and is led by Ben Heyworth, survivorship project manager, and Martine Tempest-Mitchell, project administrator with

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Dr Wendy Makin as clinical champion. Work has been supported by Macmillan Cancer Relief, The Christie Charity and others including Prostate Cancer UK.

We facilitate and support service improvements, patient and carer involvement and information resources, and strategic development in partnership with clinical staff across the hospital. Key priorities include delivering the “Recovery Package”, working on improvements to services dealing with the adverse consequences of treatment, and promoting healthy lifestyles and physical exercise. There is an established Patient Reference Group, a forum for patients to become actively involved with survivorship projects. This group developed the Christie ‘Life Ahead Plan’, a care plan booklet for people to use once treatment has finished.



Our main achievements in 2014 have been

- The development of multimedia survivorship resources to patients, the

public and other professionals via the Christie website. These include three films that describe the experiences of our patients, plus short podcasts on a range of subjects. Thanks to the support of the Christie charity, more will be added to the site in the coming year.

- Testing and evaluating new clinical roles – the Macmillan Late Effects Co-ordinator has demonstrated how a dedicated nursing post can help to co-ordinate care for people who are struggling with on- going or later problems; this will inform our new strategy for the future.
- In collaboration with the Rehab Unit, we are developing new models for “health and wellbeing” events at the end of treatment
- We are partners in the LGBT Cancer Support Alliance, a cross-cutting group set up to help LGBT patients with a cancer diagnosis receive an equitable service that recognises their particular needs - with representatives from The Christie, SCN / NHS England, the Lesbian and Gay Foundation, Prostate Cancer UK, Out With Prostate Cancer, The British Lung Foundation, Macmillan, Public Health England and Relate.
- In collaboration with Macmillan and the University of Salford, we delivered a major survivorship conference at the

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Lowry in Spring 2014, where speakers from around the UK, Europe and the US were invited to debate some of the key issues for patients “living with and beyond cancer”.

We have strong links across Greater Manchester and beyond and serve as a focal point for professionals with an interest in patients who are living with and beyond cancer here at The Christie, sharing ideas and experience with other centres including The Royal Marsden and Sheffield. The team also play an active role with Manchester Cancer, representing The Christie on the “Living With And Beyond Cancer” Pathway Board; Dr Wendy Makin is the Pathway Director.

### **Living with cancer including progressing disease and end of life care**

Our teams are available to support our patients who have to find their way to live alongside cancer, and the challenges that this can bring. The greater range of useful options mean that some people can be on a sequence of different treatments for prolonged periods and in some, cancer has become a long term condition. Many people want help in ‘living well’, with all the important ingredients of emotional support, information and management of symptoms.

A smaller number of our patients spend their last days in the hospital, if it has not been

possible to enable them to go home or closer to home. Our oncology and ward teams aim to provide excellent care to those who are dying and in this they are supported by the specialist palliative care team. The Christie achieved well in the national audit of care of dying in hospitals (NCDAH) and since this was published are now available 7 days a week, to support patients and their families at a highly sensitive and emotional time in their lives.

Using the integrated oncology model, in 2014 Macmillan have supported a bid to appoint a specialist palliative care nurse to work in conjunction with the advanced breast cancer clinics.

The team have led on development of an electronic, individualised plan for care in the last days of life which is currently being piloted as one of the new electronic nursing tools.

Palliative care is often misunderstood and sometimes perceived as ‘giving up’ or losing hope: the philosophy of the Christie team is to provide enhanced support not only when the end of life may be approaching but as part of cancer care from diagnosis onwards to help people live as well as they can. The team have taken opportunities to convey this message through a number of television, radio and newspaper appearances presenting on various issues relating to palliative, supportive and end of life care by our palliative care consultants

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and nurse consultant: Dr Berman appeared live on BBC breakfast (Hayley Cropper, Coronation St), BBC news northwest (communication at the end of life), Radio 5-live (Linda Bellingham story, palliative care in hospitals); Dr Makin discussed ‘The rhetoric of cancer’ (BBC world service) and Dr Berman was invited by the Association for Palliative Medicine (UK) to discuss the National Care of the Dying Audit results in the national media.

### Training, Education and Research

*Psycho oncology:* A key role of a liaison psychiatry/ psychological medicine team is the support and education of staff in the general hospital. It is vital that staff are aware of the close relationship between physical and mental health and the adverse associated outcomes of comorbidity. They also need to feel confident in their own abilities to communicate in difficult situations, look after patients with mental health problems and identify when someone needs referring on. Our service is therefore committed to providing education in the trust.

- The team provide level two training and case management supervision on psychological interventions, supporting clinical nurse specialists to provide psychological interventions to their patients.

- Dr Josie Butcher runs a psychosexual supervision group, enabling staff to deliver psychosexual interventions.
- The team provide training on Mental Capacity to the trust, and junior doctor training on delirium and dementia, in addition to a 4 level dementia training programme developed by Lead nurse, Loraine Burgess.
- There have been two dementia study days and a series of master classes on cancer and sexuality.

*Chaplaincy:* a basic spiritual care training module for all staff with patient care responsibilities was begun in 2014 and continues into 2015. The module will be available through e-learning.

*Complementary therapies and wellbeing:* a key part of our work lies in evaluating the benefits of complementary therapies through research and publishing papers – both service leads have completed a PhD. The service is not funded by the NHS and, so far, we have been funded by the Christie Charity, and from charitable bids, such as *Walk the Walk* and *Pink Ribbon*, and also running numerous training courses (generating in excess of £30K) and fundraising events ourselves. Both our service leads present at national and international conferences, including Australia, Canada, Japan and Italy.

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- The team delivered the first Christie “Breakthrough Cancer Pain” study day, with delegates from all over the UK, Christie Education Centre, November 2014
- Dr Makin was invited speaker at the ‘Advanced Pain and Symptom conferences held in Manchester and Guildford in 2014
- 2013-14 – Dr Berman is local lead in several international palliative and supportive care clinical drug trials, as principal investigator (including GW pharma, Astra Zeneca)
- European Association of Palliative Care 2014 (Lleda, Spain) Poster presentation – “Use of immediate-release fentanyl products in a major cancer centre”

### **Pain team and palliative care and symptom support teams:**

- The acute pain team has this year developed and rolled out an educational package for ward nurses looking after patients with epidurals and patient-controlled analgesia devices
- The palliative care team has continued ward based teaching in support of end of life care. Together with the school of oncology, critical care and oncologists, a new workshop on ‘Difficult conversations’ has been developed and piloted to help doctors tackle conversations about resuscitation .

*Cancer survivorship:* 2014 saw the creation of the ‘**#Changingprospects**’ conference brand, with our first major event last Spring and plans are underway for 2016.



“Supportive Care makes excellent cancer care possible” *Multinational Association of Supportive Care in Cancer, 2015*



The Christie **NHS**  
NHS Foundation Trust

- We are assisting University of Salford in development of a postgraduate cancer survivorship course and Dr Makin has contributed to this.
- Dr Makin spoke at the Macmillan/national Palliative Care Nursing conference, Manchester July 2014 on ‘Cancer survivorship and palliative care: the differences and overlap

Publication Survivorship programs and care planning. 2013, 119 Suppl 11:2179-86 Cancer

McCabe, M;Faithfull,S;Makin,W and Wengstrom Y

## Posters

Finchett C Mackereth P Thomson D Knowles R Stringer J Slevin N (2014) Promoting a healthy lifestyle package for head and neck cancer patients. Our Impact on Health. MAHSC Conference. Manchester Academic Health Science Centre. 15th December

Mackereth P Maycock P Orrett L Finchett C (2014) Smoke Free Cancer Care – On site and Beyond. URBAN Health Conference International Conference University of Manchester