

People with Long-term Conditions including Cancer Summary

The role of the GP in caring for people with long-term conditions including cancer

As a GP your role is to:

- Work with patients, their families and carers in a collaborative manner that supports patient activation; encouraging individuals to develop the knowledge, skills and confidence to take an active role in their own self-care
- Work collaboratively with people living with long-term health conditions to agree goals, identify support needs, develop and implement plans, and monitor progress
- Move away from a disease-based model of care towards a person-centred system that takes a biopsychosocial approach, considering each person and their family holistically
- Involve the whole Multi-Disciplinary Team (MDT) to facilitate person-centred approaches to care, including the systematic gathering of information about an individual's personal experience of living with their conditions and an organisational approach to collaborative care and support planning
- Proactively encourage lifestyle changes that will reduce the risk of other health problems in those who have already developed long-term conditions, cancer or multi-morbidity.

Key Areas for Exam preparation

Common and important conditions

Long-term conditions cover a wide range of health conditions (see definition above), including but not limited to any condition or combinations of conditions in the categories listed below:

- Non-communicable diseases (e.g. cancer and cardiovascular disease);
- Communicable diseases (e.g. Human Immunodeficiency Virus (HIV) / Acquired Immunodeficiency Syndrome (AIDS));
- Certain mental health disorders (e.g. schizophrenia, depression) and
- Ongoing defined impairments (e.g. blindness, musculoskeletal disorders).

Examples of common long-term physical health conditions include:

- Diabetes
- Cardiovascular (e.g. hypertension, angina)
- Chronic respiratory (e.g. asthma, Chronic Obstructive Pulmonary Disease (COPD))
- Chronic neurological (e.g. Multiple Sclerosis)
- Chronic pain (e.g. from arthritis)
- Other long-term conditions (e.g. Chronic Fatigue Syndrome, Irritable Bowel Syndrome (IBS), cancer) etc.

Consider the following areas in the context of long-term conditions and cancer:

Natural History of the Condition(s)

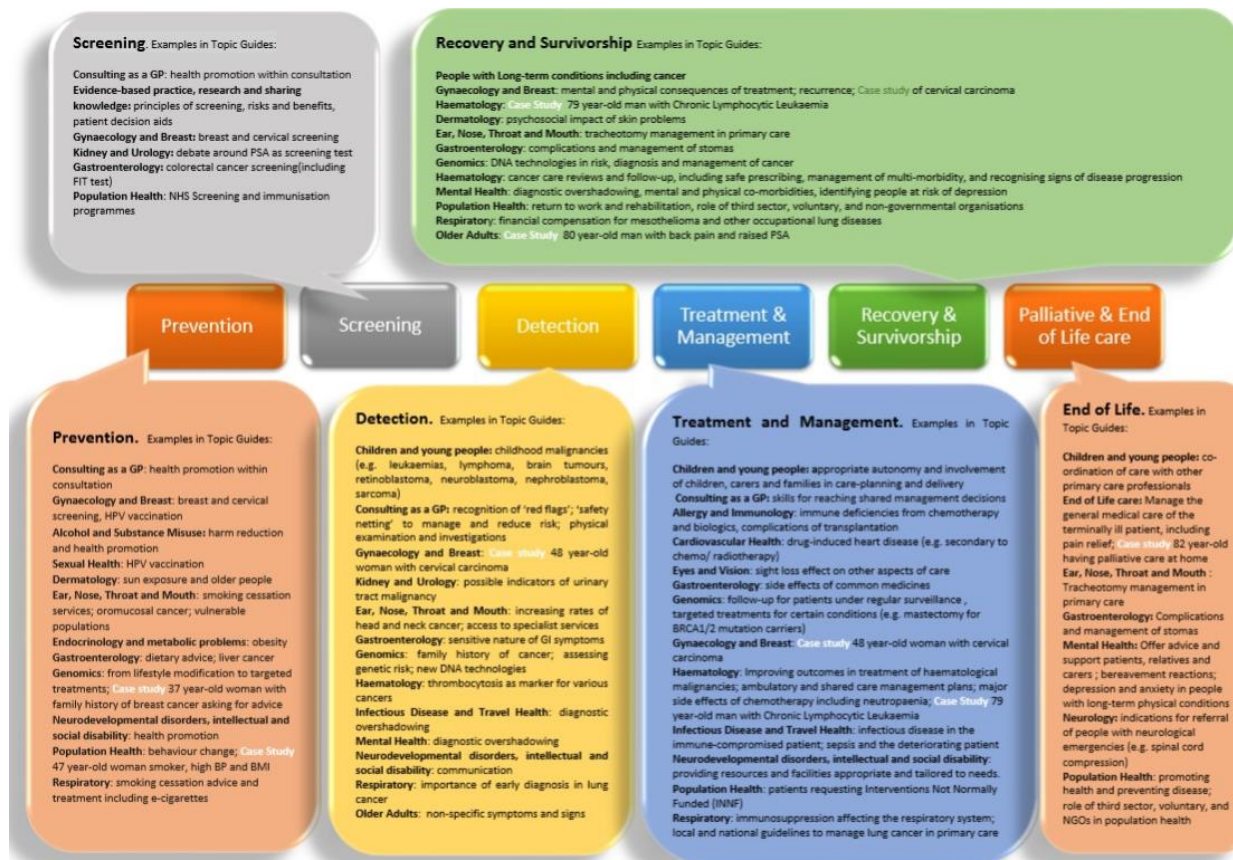
- Different trajectories of illness commonly seen in long-term conditions and cancer. These take many forms, but common trajectory patterns include stepwise (e.g. vascular dementia), exacerbations (e.g. COPD), gradual decline (e.g. frailty) and relapse/recurrence (e.g. breast cancer).
- Conditions which may become chronic through treatment or through the natural process of the disease

Service Issues

- Whole system approaches to care, including integrated care models with GPs working in multidisciplinary teams alongside secondary care, social care and others
- Active identification, surveillance and follow up
- The importance of continuity of care within organisations, teams and with individual health professionals
- The important role of third-sector providers (such as voluntary organisations, community groups and social enterprises) which can provide tailor-made support and interventions for people with certain long-term conditions (LTCs)
- Identifying and supporting unpaid carers of people with long-term conditions
- The benefits of the Collaborative Care and Support Planning process
- The factors influencing the relationship and dialogue between the professional and the person/carer and the core principles of communication (e.g. a partnership approach, goal setting and action planning)
- The factors that should be considered in care planning (e.g. multi-morbidity, support networks, cultural background)
- The phases of the care planning process
- The ethical and legal issues (e.g. autonomy, consent and capacity)
- The issues around personal budgets and personal independence payments The organisational barriers to effective Collaborative Care and Support Planning and how these impact on quality of care, including:
 - Limitations on the time available in GP appointments
 - Local/national policies and targets

- Public sector funding policies, in particular those relating to health and social care
- Local policies (e.g. the management of Individual Funding Requests and how this differs in the four UK nations)
- Shared decision-making processes and their application to select tests, treatments, management or support packages, based on clinical evidence and the patient's informed preferences
- Tools which can be used to measure the spectrum of skills, knowledge and confidence of Individuals and the extent to which they feel engaged and confident in taking care of their condition (e.g. the Patient Activation Measure (PAM))
- Techniques and frameworks for enabling behaviour change and their application to interactions with patients with diverse backgrounds (e.g. Health Coaching).

1. Cancer in the Curriculum: Map



Suggested resources:

General information

- <https://www.hospiceuk.org>
- <https://www.mariecurie.org.uk>
- <https://www.rcgp.org.uk/clinical-and-research/resources/toolkits/collaborative-care-and-support-planning-toolkit.aspx>
- <https://www.macmillan.org.uk/about-us/what-we-do/we-make-change-happen/we-shape-policy/life-after-cancer-treatment.html>
- <https://www.yearofcare.co.uk>
- <https://www.e-lfh.org.uk>
- https://www.macmillan.org.uk/documents/aboutus/newsroom/consequences_of_treatment_june2013.pdf

Specific Conditions:

SEE TOPICS

- <https://www.rcgp.org.uk/clinical-and-research/resources/toolkits.aspx>
- https://www.datadictionary.nhs.uk/data_dictionary/nhs_business_definitions//long_term_physical_health_condition_de.asp?shownav=1

Care and support Planning

- <https://www.evidence.nhs.uk/search?q=phases+of+care>
- <https://www.evidence.nhs.uk/search?q=collaborative%20care>
- <http://www.educationforum.co.uk/Health/careplanning.htm>
- <https://www.evidence.nhs.uk/search?q=care%20and%20support%20planning>

Collaborative Care

- <https://www.evidence.nhs.uk/search?q=collaborative+care>
- https://www.centreformentalhealth.org.uk/sites/default/files/2018-09/Centre_for_Mental_Health_Shivam_Shah_Collaborative_Care.pdf

Independence Payments

- <https://www.evidence.nhs.uk/search?q=independence%20payments>

Personal health budgets

- <https://www.nhs.uk/conditions/social-care-and-support-guide/money-work-and-benefits/personal-budgets/>
- <https://www.disabilityrightsuk.org/personal-budgetsthe-right-social-care-support>
- <https://www.ageuk.org.uk/information-advice/care/paying-for-care/financial-assessment/personal-budgets-and-direct-payments/>

Individual funding

- <https://www.evidence.nhs.uk/search?q=individual%20funding%20requests>

Quality of care

- <https://www.nice.org.uk/Media/Default/About/what-we-do/Into-practice/Practical-steps-improving-quality-of-care-and-services-using-NICE-guidance.pdf>
- <https://www.bmj.com/content/322/7302/1580>

Patient Activation Measures

- <https://www.england.nhs.uk/wp-content/uploads/2018/04/patient-activation-measure-quick-guide.pdf>

Health Coaching

- <https://www.evidence.nhs.uk/search?q=health%20coaching>

Long term care

- <https://www.evidence.nhs.uk/search?q=long+term+care>

Long Tern conditions

- <https://www.evidence.nhs.uk/search?q=long%20term%20condtions>
- <https://www.bmj.com/content/350/bmj.h181>

Illness Trajectories

- <https://www.evidence.nhs.uk/search?q=illness%20trajectories>
- <http://www.spict.org.uk/wp-content/uploads/2018/02/Murray-plenary-paper-1.pdf>

Self Management

- <https://www.selfmanagementuk.org/faqs/types-of-long-term-conditions>
- <https://www.england.nhs.uk/personalisedcare/supported-self-management/>