

Introducing an onco-geriatrics referral pathway for frail older adults living with cancer

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Introduction

In response to the increased numbers living with both cancer and frailty, the Royal College of Physicians (RCP) introduced guidance on implementing frailty assessment and management in oncology services in November 2023. Frailty-informed care has been demonstrated to improve outcomes that matter to patients. The RCP suggests that where the management of frailty is beyond the skillset of the oncology team, links should be built with local geriatric teams to develop referral pathways ensuring holistic care, responding to individual needs.

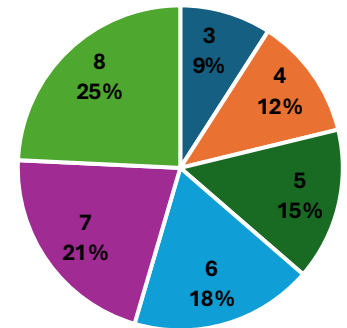
Method

We set up a referral pathway within an existing geriatric 'hot clinic' at a North London district general hospital, facilitating referrals from oncology colleagues then, following initial success, incorporating hematology referrals.

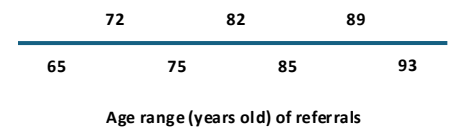
This was complemented by drop-in multidisciplinary feedback sessions and teaching sessions on frailty and comprehensive geriatric assessment.

Results

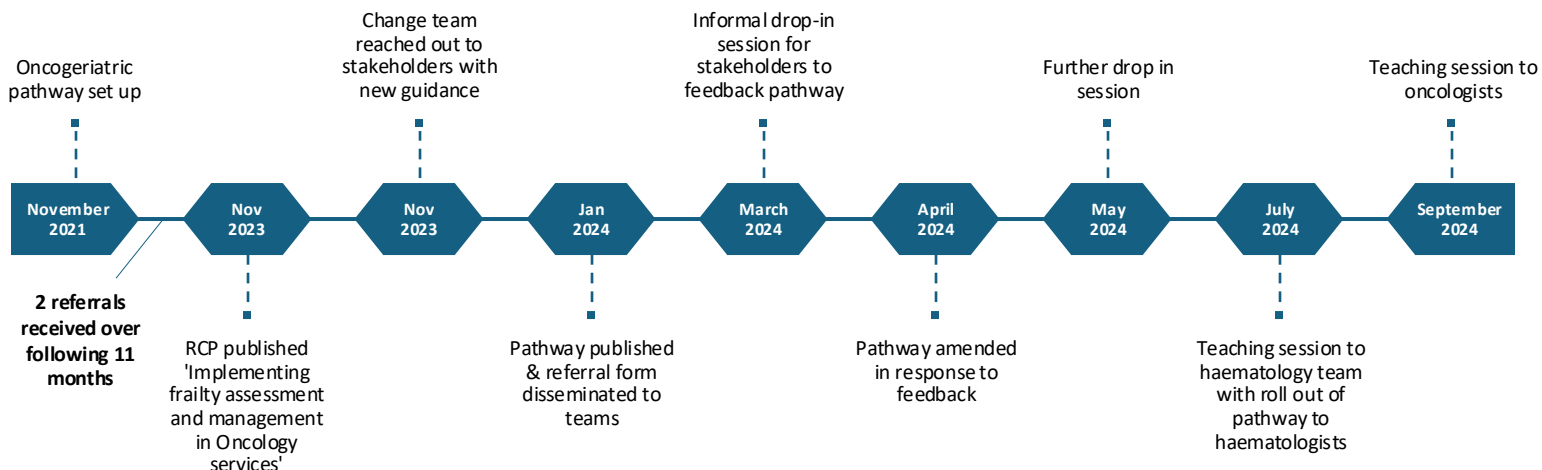
There were 23 referrals between January and November 2024. The median Rockwood frailty score of those referred was 5. Cancer sites included rectal, urological, upper GI, lung and breast as well as two haematological malignancies. The majority of these referrals were for polypharmacy (6), pre-treatment optimisation (6) and poor mobility (6). Other categories included falls and advance care planning. Patients waited between 2 and 21 days for an appointment. Outcomes for patients seen included rationalising medications (8); onward specialty team referral and investigations (7); involvement of our multidisciplinary colleagues in four cases (therapy and dietitian), and advance care planning in two cases. Through our interventions, assessment of frailty score improved from 0 to 96% of patients included in this sample.



Rockwood frailty score of referrals received by percentage (%)



Age range (years old) of referrals



Conclusion

We have demonstrated the feasibility of incorporating an onco-geriatrics service within an existing geriatrics service and nurturing links between departments through regular teaching sessions; with scope to expand this into dedicated clinic time. As well as contributing to timely and excellent patient care, this also provides training opportunities to resident doctors. Further data is currently being collected in the form of patient surveys to look at the impact of this service on patient experience and expand the service to review bone protection and iron deficiency anaemia. Whilst outside the scope of the initial project, future work could look into whether the positive impact of this service translates into a reduction in re-admissions in this cohort of patients.