Resilience: a model for allied health service provision in an oncology setting

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In its Cancer Action Plan 2008–2011, the Victorian Government identified four action areas to address over that time period. Of significance for the provision of allied health services was the identification of supportive care as a key priority area, recognising the need for early detection of supportive care needs through screening, and intervention to support patient and carer. Follow-up care and survivorship issues were identified as an under-developed but important field of cancer service provision.

This paper will be presenting a model developed with the aim of providing allied health services to an oncology population based in a regional health service. Historically, allied health services within the local medical oncology unit have been limited to dietetics and social work. External to the unit, most breast cancer patients are eligible for specialist multidisciplinary outpatient services, however there is no single, specialised rehabilitation service for other diagnostic groups. This results in a disparity of service provision dependent upon diagnosis. The aim of the resilience program was to provide an evidence-based, sustainable, patient-centred program addressing cancer risk factors, side-effects of surgical and adjuvant treatments and supportive care needs in a bio-psychosocial framework. It also aimed to promote awareness of the role of allied health in this patient population.

With funding provided by the local Integrated Cancer Service, this demonstration project was developed and conducted over the period of a year. Allied health staff experienced in oncology facilitated a group-based program that combined exercise, multidisciplinary education and relaxation training. Content was based upon current evidence and upon the needs of the individual participants as identified at initial assessment. Participants completed evaluations at the completion of each session and were also involved in interviews at the completion of the program. The outcome of these quantitative evaluations will be discussed along with the insights gleaned from qualitative interviews.

Specific insights into the process of formulating such a program will be presented with the aim of encouraging the engagement of allied health staff in this developing service area. This will highlight the opportunities and challenges that were identified during the planning, implementation and evaluation periods of the program. It will also present avenues for further consideration.