Improving the quality and value of care for people with poor prognosis cancers: *a national questionnaire survey of General Practitioners in Scotland*

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Abbreviated abstract:

Most people with deteriorating health prefer care that is home-based, providing sufficient support is available. Recent Scottish research reveals that people with advanced cancer are particularly high users of unscheduled and acute care, and at questionable value. We undertook a national survey of GPs in Scotland, with question domains including communication from Oncology teams and enablers and barriers to community care. Quantitative findings from 197 GP respondents is presented.

Related publications:

•Mitchell S, Loew J, Millington-Sanders C, Dale J. *Providing end-of-life care in general practice: findings of a national GP questionnaire survey.* Br J Gen Pract. 2016 Sep;66(650):e647-53. doi: 10.3399/bjgp16X686113. Epub 2016 Jul 5. PMID: 27381483; PMCID: PMC5198709.

•Herrmann, A., Carey, M.L., Zucca, A.C. *et al. Australian GPs' perceptions of barriers and enablers to best practice palliative care: a qualitative study*. *BMC Palliat Care* **18,** 90 (2019). https://doi.org/10.1186/s12904-019-0478-6

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Scottish Partnership for Palliative Care

Background and Aim

Around one third of people in Scotland with a new diagnosis of cancer live less than one year from diagnosis and, for some or all of this time, require a supportive and palliative approach to their care. For most, this care is provided in the community by Primary Care Teams, though some also require involvement of Specialist Palliative Care Services and support from Social Care and the Third Sector. A large research study is currently underway in Scotland examining care pathways, outcomes and experiences for people with advanced cancer to understand what this care looks and feels like.

However, to build a more complete picture of the reality of advanced cancer care in the community, work is also needed to understand the experiences of the General Practitioners (GPs) delivering it: in effect, what works well for them at the moment and where is there room for improvement.

The aim of this questionnaire survey was to explore GPs’ perspectives of advanced cancer care in the community to inform the development of improved care pathways for patients and families.

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Methods

An electronic questionnaire survey was developed. The first section gathered basic demographic data about survey respondents. The next three sections explored GP perceptions of:

- The standard of written communication from secondary care
- The barriers and enablers to delivering high quality advanced care in the community
- The current provision of advanced cancer care in the community.

The survey had optional free-text boxes for each question area.

The questionnaire was piloted and refined with support from Health Board GP Cancer and Palliative Care Leads across Scotland. The Leads then distributed the survey to all GPs in their region by email. The survey was administered through the online survey platform Qualtrics.

Quantitative findings only are presented here and qualitative findings are still to be analysed. Ethical approval was received from the University of St Andrews School of Medicine Ethics Committee.

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Results and Conclusions **197 GPs completed the online survey**

- 80% of respondents reported receiving written communication from Oncology about their patients' clinical management plans either 'always' (16%) or 'most of the time' (64%)

- Only 43% and 11% of respondents respectively reported a similar level of communication around patient understanding of diagnosis and anticipatory care planning.

- The presence or absence of adequate time was the most frequently identified enabler and barrier to delivering advanced cancer care in the community. The availability or lack of availability of family support was the second most frequently identified enabler and barrier.

- A large majority of respondents reported that their patients currently receive timely anticipatory care planning (83%) and timely clinical assessments for uncontrolled symptoms (97%) either 'always' or 'most of the time'. A smaller majority (53%) reported the same extent of support for family members.

GPs are core providers of advanced cancer care in the community, but require adequate time and up to date information to do their job effectively. Qualitative findings will be analysed and all findings will inform future national strategy and practice

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