

The Role of the Uro- Oncology CNS in Central MDT

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Role of Central MDT Meeting

- To co-ordinate and plan care for cancer patients throughout the whole of their care pathway
- To ensure an accurate diagnosis is agreed and appropriate treatment pathway is planned
- NICE recommend that people with cancer should be managed by a multi-disciplinary team

Key Members of Uro-Oncology Central MDT

- Urological Surgeon
- Radiologist
- Pathologist
- Oncologist
- Clinical Nurse Specialist
- MDT co-ordinator
- Junior members of medical team
- Research Nurse

Role of the CNS

- Key Worker
- Main point of contact for cancer patients and their families
- To provide person-centred co-ordinated care
- To act as the patient's advocate
- To provide information regarding cancer and it's treatment
- To sign-post to other care providers
- Key link with other healthcare professionals
- Most patient contact
- To provide physical and emotional support
- To share knowledge and experience

Role of the CNS Prior to Central MDT Discussion

- To gather and collate information prior to discussion
- To liaise with tertiary hospital CNS's
- To liaise with MDT co-ordinator to ensure timely and appropriate discussion
- To inform patients of planned discussion
- To support and advise the MDT co-ordinator

Role of the CNS During Central MDT Discussion

- Advocate for patients in a medical-dominated meeting
- To present information to ensure patient-centred decision-making
- Record outcomes
- To request clarification if anything is unclear
- Identifying patients for research studies

Role of the CNS Post Central MDT Discussion

- To communicate MDT recommendations to patients, GP's and clinical teams within agreed time-frames
- Liaise with admin and clerical teams to ensure appropriate and timely follow-up booked
- To track the patients through the system to ensure we achieve cancer waiting targets

Our Aims

What the people we serve want



The results of the National Cancer Patient Satisfaction Survey states
“On every question, patients who had contact with a CNS were more positive than those that did not; and the difference between these two groups were in most cases large”

DoH 2010

Conclusion

- Nurses focus on patient-related factors and therefore their presence in MDT is crucial to ensure a patient-centred decision-making process
- The loss of patient-centred information has a detrimental effect on the quality of clinical decisions made in MDT meetings
- Nurses have skills in gathering information about issues that are important to patients
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