

# COPS CHRONICLE

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## WHAT'S NEW

- Welcome to the New Year! COPS are officially entering the last year of Macmillan funding for the new OT service we have been providing. We will be collecting data to showcase why we believe this service should be embedded into our essential patient pathways for Older Adults and cancer care. We look forward to sharing this with you!

## Contact Us



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## TOPIC OF THE MONTH -

### FRAILTY FOCUS: G8 AUDIT INSIGHTS FOR CANCER CARE EXCELLENCE

As COPS continues to evolve, we are doing some quality improvement projects. As part of this, we recently audited the use of G8 score paperwork across the inpatient wards at the Beatson to understand how well this vital screening tool is being used. The G8 score is a simple but effective geriatric screening tool designed to identify patients aged 65 and over who may be at **risk of frailty or who would benefit from additional support through a Comprehensive Geriatric Assessment (CGA)**.

The audit showed areas of good practice but also highlighted opportunities to improve consistency in using the G8 tool for all older patients admitted to the Beatson. By embedding the G8 score into routine practice, we can better identify patients with specific needs ensuring they receive timely interventions to improve their cancer journey. If you need information regarding where to find the G8 score in the admission notes, please reach out!

#### Why would we ask you to use it?

The G8 frailty screening tool is crucial for identifying frail older cancer patients. It helps staff assess risks, tailor treatments, and manage potential complications, such as adverse reactions to chemotherapy or other treatments. By recognizing frailty early, personalized care plans can be created, improving outcomes, reducing hospital stays, and enhancing recovery. The tool also supports a multidisciplinary approach, involving older people specialists like geriatricians and CS occupational therapists, ensuring comprehensive care. Overall, evidence shows that using the G8 tool promotes safer treatment, better quality of life, and optimal discharge planning, leading to improved long-term results for older cancer patients. Moving forward, we will continue working with teams to promote the consistent use of the G8 score across all wards to enhance care pathways for older patients. Stay tuned for the next steps of our G8 audit.

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## COMPREHENSIVE GERIATRIC ASSESSMENT

‘The **G8 GERIATRIC SCREENING TOOL** we use identifies older cancer patients who could benefit from a comprehensive geriatric assessment (CGA).

When undertaking a CGA the person can be assessed holistically. In COPS we use a number of tools which review: **frailty indicators, socioeconomic/environmental factors, physical function, mobility and balance, review of polypharmacy, mental health and cognition.**

By discussing these factors with the patient, it determines their abilities and identifies any needs that will need to be addressed through creating an individualised care plan. The care plan should be reviewed at regular intervals and you must ensure that each aspect of their care has been followed through. It is crucial to remember that you should always consider what is important to the patient.

## CGA AND ONCOLOGY - DOES IT HELP?

Evidence suggests that following a **CGA**:

1. Patient Outcomes are **improved**.
2. Patients are more likely to **complete treatment and experience less severe toxicities**.
3. The patient and team **produce problem lists** and **develop goal-driven interventions** to tackle these.
4. Hospital re-admissions are **reduced**.

### THE G8 GERIATRIC SCREENING TOOL

The total **G-8 score** lies between **0 and 17**.

A **higher** score indicates a **better** health status.

A **threshold** is suggested **at 14 points**, meaning that a patient with **a score of 14 or lower** should undergo **full geri-evaluation**.

G8 questionnaire	
Items	Possible answers (score)
Has food intake declined over the past 3 months due to loss of appetite, digestive problems, chewing or swallowing difficulties?	0 : severe decrease in food intake 1 : moderate decrease in food intake 2 : no decrease in food intake
Weight loss during the last 3 months	0 : weight loss > 3 kg 1 : does not know 2 : weight loss between 1 and 3 kgs 3 : no weight loss
Mobility	0 : bed or chair bound 1 : able to get out of bed/chair but does not go out 2 : goes out
Neuropsychological problems	0 : severe dementia or depression 1 : mild dementia or depression 2 : no psychological problems
Body Mass Index (BMI (weight in kg) / (height in m <sup>2</sup> ))	0 : BMI < 19 1 : BMI = 19 to BMI < 21 2 : BMI = 21 to BMI < 23 3 : BMI = 23 and > 23
Takes more than 3 medications per day	0 : yes 1 : no
In comparison with other people of the same age, how does the patient consider his/her health status?	0 : not as good 0.5 : does not know 1 : as good 2 : better
Age	0 : >85 1 : 80-85 2 : <80
<b>TOTAL SCORE</b>	<b>0 - 17</b>

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## HOW TO REFER TO THE COPS TEAM:

### INPATIENTS



OUR REFERRALS ARE NOW ON TRAKCARE!

### ITEM LOCATION: CANCER OLDER PEOPLES SERVICE

\*IF YOU NEED ASSISTANCE WITH THIS NEW FORM PLEASE EMAIL OR CALL THE TEAM

### OUTPATIENTS:

- EMAIL COPS@NHS.SCOT - PLEASE GIVE THE PATIENT'S NAME, CHI AND SHORT STATEMENT AS TO WHY YOU ARE REFERRING THEM.

\*PLEASE NOTE THAT WE COPY AND PASTE THESE  
EMAIL REFERRALS INTO PATIENTS NOTES\*

OR

- CALL 01300 9926 / 7137 WITH THE INFORMATION ABOVE



## PATIENT CRITERIA & WHAT WE DO

### Referral Criteria

1. Every patient over 65 who attends BWoSCC with a CA diagnosis AND
2. Any patient who presents with frailty characteristics or complex comorbidities:
  - Challenges with ADLs
  - Falls
  - Decreased mobility
  - Delirium / cognition
  - Continence issues
  - Treatment side effects
  - Anxiety
  - Pall care needs
  - Equipment needs

A 'one-stop shop' supportive oncology service for people over 65 years old, with a cancer diagnosis and complex needs and/or comorbidities. Our multidisciplinary onco-geriatrics team can provide medical assessments, assist with symptom management, implement social support, provide equipment, complete polypharmacy reviews and refer onwards to community and hospital based services. We can see patients at any time during their cancer journey, including before or after treatment.