Background
Cancer survivorship covers the physical, psychosocial and economic issues experienced by cancer survivors. Primary care providers play a key role in the provision of primary health care as well as surveillance for late effects, recurrence and second primary cancers.

- In 2013, over 1 million people in Canada (~200,000 people in British Columbia) have had cancer
- 65% of adults and 80% of children with a cancer diagnosis are expected to survive for at least 5 years
- 700 “unattached” cancer survivors in the Vancouver area (no regular primary care provider)
- Surveillance recommendations not always followed by patient or provider
- Survivorship issues not always addressed by patient or provider
- Many oncologists manage primary care needs

"By taking on patients who are ready to be discharged but who don’t have a family physician, the Survivorship NP facilitates their ongoing medical care. This also opens space in the follow-up medical oncology clinics for patients who require this limited resource the most."
- Medical Oncologist, Systemic Therapy, BC Cancer Agency, Vancouver Centre

Implementation
- Survivorship Nurse Practitioner (NP) is a Registered Nurse with post-graduate training and Nurse Practitioner credential
- NP completed General Practitioner in Oncology (GPO) training offered by the BC Cancer Agency Family Practice Oncology Network
- Position funded by British Columbia Ministry of Health (NP4BC initiative) and hosted by the BC Cancer Agency and UBC Family Practice Centre

"It’s great having a NP with a specialized cancer expertise as she is a resource for the management and follow up of our oncology patients. She also serves as a conduit via which physicians at the clinic can access cancer agency resources, and the oncologists."
- Family Physician and Research Director, UBC Family Practice Centre, Vancouver

Practice setting
- UBC Family Practice Centre, Vancouver, BC, Canada
- Team: 8 Family Physicians, 2 Nurse Practitioners, 8 Family Practice Medical Residents, 2 Psychiatrists, 1 Dietitian, 1 Clinical Pharmacist, 24/7 on-call Physician services
- Survivorship NP accesses cancer-related diagnosis and treatment history through the BC Cancer Agency electronic medical record

Registered patients
- 109 patients who have had a cancer diagnosis
- 16 types: 46% breast, 13% lymphoma, 7% colorectal
- 27 family members
- Average age: 51
- Gender: 73% female, 27% male
- Ongoing appointments with oncologist: 78% yes, 22% no

Evaluation: Stakeholder interviews & patient satisfaction survey
A) Stakeholder interviews
Interviews with seven key stakeholders (oncologists, healthcare administrators, primary care team) conducted six months after NP start-date to identify and address concerns early

Results
i. Role clarity: Stakeholders not clear about NP scope of practice and how role different from LPN, RN
What we did: Organized face to face meetings to explain scope and answer questions
ii. Awareness: Stakeholders not all aware that NP is accepting patients
What we did: Established guidelines for communicating and reporting
iii. Communication: Lack of identified guidelines for communication between NP and oncologists (communication via phone, email and/or electronic medical record)
What we did: Established guidelines for communicating and reporting

B) Patient satisfaction survey
- Client Satisfaction Tool (Bear & Bowers 1998)
- Mailed to 92 respondents. Response rate 66%

![Figure 1: Percent satisfied with NP by element](image)

- Most comments focused in a positive way on the NP providing affective support, i.e. providing “reassurance, comfort, or understanding regarding a client’s expressed feelings or worries; attending to the client's emotional state – actual or likely – and making an encouraging, optimistic, or supportive statement in the content of an expressed concern.”

- One comment focused on the NP scope of practice

"After looking for a GP for 2 years, I was referred to see [the NP]. I was so glad that she was: 1) available, 2) we came up with a health plan for me, 3) she understood my concerns, 4) she took her time so each problem was or will be treated. High quality service."

Future directions/next steps
- Ongoing strategies to promote and raise awareness of the NP role
- Expand network of Survivorship Nurse Practitioners across British Columbia
- Continue to evaluate (e.g. what is the impact of the Survivorship NP on patient adherence to surveillance, patient life expectancy and use of other health system resources?)

"I did not have a family doctor prior to being referred and probably would not be receiving regular care if not for this program."

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References