**INTEGRATION OF REFERRAL TO CANCER COUNCIL SUPPORT SERVICES INTO USUAL CLINICAL CARE – A PILOT STUDY**

**Oral presentation**

**Background**

Cancer “helplines” are a common model of providing information and support to people affected by cancer. Patients and their carers have high information and support needs, yet research shows there is low awareness and use of these services. Patients have reported they would be more likely to use services if suggested by a clinician, yet routine referrals to these services are lacking in the clinical oncology setting.

**Aim**

i) determine whether a clinician referral to Cancer Council Victoria (CCV) 131120 service increases uptake of support services among patients.

ii) determine the acceptability and feasibility of integrating referrals into usual patient care.

**Methods**

A pre-post study design is adopted with two health services in Victoria (one metropolitan and one regional).

Health professionals (HPs) will attend short information sessions detailing CCV support services which are listed on the referral pad. In an appointment, the clinician may choose to refer their patient to any support services offered by CCV. Upon handing the referral to the patient, the HP will inform them of the referred service and how to contact CCV.

Calls to CCV 131120 will be monitored for changes in volume of patients calling from the pilot sites. Call content and outcome will also be recorded.

A sample of HPs and patients will complete a survey assessing feasibility and acceptability of the referral system.

**Results**

The project is now in the implementation phase in the Chemotherapy Day Unit, Palliative Care, and Specialist Lung Clinic. Data collection is due to commence in November with preliminary results to be presented at BRCC.

**Conclusions and Implications**

A HP’s recommendation for a service at a salient point in the cancer trajectory can increase uptake of support services. This project will inform a state-wide mechanism for patients to access cancer support services, as identified in conjunction with their clinicians.

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