

Health and Wellbeing Clinics – Summary of evaluation:

Health and Wellbeing clinics (HWC) are “**one stop shops**” where patients and the carers/family can access professionals and the full range of relevant information in one place, at one time, rather than individual appointments to see different clinical and non-clinical staff. They can be run as a series of short presentations followed by information stands on a particular topic or like a market place that people can wander around. The clinics aim to support the patient making the transition from cancer patient to someone living with and beyond cancer.

There were 14 pilot sites across the UK from April 2010 to March 2011. 87 clinics were held and a total of 764 patients attended. The pilots tested a range of models; this means that those implementing HWC can tailor them to the specific needs of the client group. The informal atmosphere of the clinics enhanced the delivery of the Health and Wellbeing messages. The combination of using professionals and volunteers at the HWC was an effective one, with each group making a unique contribution to the overall event. Having been through cancer, volunteers were able to offer hope and encouragement to patients, to feel positive about their own future.

The evaluation found that the clinics can enhance the quality of care, improve patient reported outcomes and reduce patients’ use of health services. (*Evaluation of Macmillan Health and Wellbeing Clinics – Final Report, OPM 2011*).

HWC were originally intended to support the patient at the post treatment phase, however evidence from the pilot sites suggest that clinics may work well earlier in the pathway. Pilot sites catered for patients at various points including:

- Lung – at the point of diagnosis for those not receiving treatment with curative intent
- Breast - at the point of diagnosis and 4-6 weeks post active treatment
- Gynaecology – 4-6 weeks post active treatment
- Haematology – within 6 months of treatment
- Prostate – within 6 months – 1 year of treatment

The role of HWC as an alternative to one-to-one follow up out patient appointment is not yet clear. The National Cancer Survivorship Initiative is currently testing a risk stratified approach to post treatment care. This means that the care pathway will be determine by the cancer, its treatment and the personal circumstance of the patient. This work may help to generate information about which segment of the patient population, and which cancers will benefit most from HWC.

For further information about Health and Wellbeing Clinics please see the final evaluation report at www.ncsi.org.uk/what-we-are-doing/health-and-well-being-clinics/