

## REASON WHY?

Barrett's Oesophagus is a condition where the tissue lining the oesophagus changes, which can increase the risk of developing oesophageal cancer. NICE guidelines (NG231) on Barrett's oesophagus (2023) recommend that all patients diagnosed with Barrett's Oesophagus are offered a clinic appointment which has not been previously offered at SaTH.



To improve patient education post diagnosis of Barrett's Oesophagus by June 2024 as evidenced by all new patients with an initial diagnosis of Barrett's Oesophagus to be offered a follow-up clinic appointment within 6 weeks of their diagnosis, as per NICE guidelines (NG231)

## PLAN

The plan was to improve the Barrett's Oesophagus Service for this cohort of patients to offer all newly diagnosed patients an outpatient clinic appointment to ensure that all patients receive comprehensive care, including support and education, which are essential for managing chronic conditions. Patients need to understand their diagnosis, the associated risks, and the importance of regular monitoring. They also need psychological support to help them cope with the anxiety and fear that often accompanies a diagnosis of a pre-cancerous condition.

## DO

The plan was to develop a SOP for the running of the clinic, upskill the staff into how to have conversations with patients about the condition, a clinic space, code and staff were secured and paperwork and recording of activity was planned. The working group attended huddles and key meetings with different staff groups to launch the new service.

A business case was submitted detailing the plan and a Gantt chart was produced to provide a clear visual representation of the project timeline and to facilitate detailed scheduling. A small working group of Clinical Endoscopists met regularly to deliver the actions.

## STUDY

In a 3 month period, approximately 70 patients are newly diagnosed with Barrett's Oesophagus- previously none of these patients would have been offered a clinic follow-up to discuss their diagnosis. With the launch of this new service, we are now offering 100% of these patients an OPA. Outstanding results!



(L) Paula Brayford and Margaret Meredith hold up the information leaflet that can be discussed with patients in the new clinic. (Above) the team use simulation to learn about techniques to discuss the condition.

## ACT

The project has been massively successful, and patients have given positive feedback therefore the clinics are here to stay!

### Next steps

The next steps will be to upskill the rest of the Clinical Endoscopist Team to run these clinics and perhaps even expand to opening more Nurse-Led OP Clinics!