

Where is beetroot used?

Speciality/Tumour Site	Scenario	Solution	Benefit
CANCER			
Bladder	Routine surveillance flexible cystoscopy cancelled and not rebooked. Patient does not undergo key surveillance scanning within clinically set timeframes.	Real time procedure dates can be added to beetrootCANCER overview specific to each patient and if cancelled, Clinical teams can be notified and rebooking organised.	beetrootCANCER provides a more coherent approach to cancellation and booking process. Patient receives key surveillance scanning in a timely fashion despite cancellations.
Colorectal	Patients failing to complete CEA blood tests due to lack of communication regarding time sensitive follow up schedule.	Provision of bespoke blood test reminder SMS text message and/or letter sent directly from beetroot platform at regular intervals along patient surveillance pathway.	Significantly reduces non-compliance rates leading to more streamlined surveillance pathway and less anxiety for patient.
Colorectal	Patients missing crucial colonoscopy and CT scan surveillance tests as follow up for colorectal cancer diagnosis and treatment.	Ability to set specific reminder alerts for multiple surveillance tests.	Ensures patients receive colonoscopies and scans within clinically set parameters, providing a gold standard of follow up care and reduced risk of delay.
Dermatology	Duplicate bookings of surveillance scans, due to CNS teams being unclear regarding responsibility for surveillance schedules when patient moves between sub-specialities.	Allocation note present on key surveillance reminder alerts, set to clinically agreed pathway parameters.	Provides clarity regarding responsibility for continued surveillance throughout whole surveillance pathway.
Gynaecology	Patient has a prolonged period with no contact from clinical team.	Health Needs Assessment Questionnaires sent to patient via SMS text message directly from beetrootCANCER at specific points along follow up pathway.	Patient can complete and return health questionnaires directly to clinical teams enabling rapid response and establishing a regular link between clinical teams and patients. Patients receive help and support when required.

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Renal	Incidences of multiple surveillance scans being booked for same patient duplicating clinical workload.	Ability to set alert reminders for administrator to check if scans have been requested, log when booked and record when completed which can be seen by whole clinical team.	Allowing the administrator to monitor and review reminder alerts moves activity away from the clinician and ensures only required scans are requested, booked and completed. Incidences of duplication is reduced leading to less confusion and anxiety for the patient and more clarity for clinical teams.
Metastatic Breast	Large cohort makes it challenging to contact all patients on a regular basis.	Allocating each patient a tailored contact pathway allows frequency of contact to be set appropriately.	Ensures timely contact, with patients in need of regular support allocated narrower timeframe parameters and contacted more regularly than patients who are coping well and in need of less contact. Patients can move between pathways as necessary ensuring a tailored approach to holistic needs.
Metastatic Breast	A need to respond to time sensitive specific requirements of patients entering end of life phase.	Bespoke health needs assessment questionnaire devised to cover key aspects of end of life planning and care.	A bespoke approach to holistic needs assessments allows clinical teams to offer a compassionate approach to specific concerns and anxieties raised during this difficult and emotional phase, facilitating open and honest discussion.
Neuro-Oncology	Clinical Teams struggle to record when a patient requires surveillance tests due to the convoluted nature of patient pathway.	Personalised reminder alerts which can be amended when necessary to comply with patient follow up pathway.	Patients receive surveillance tests when appropriate. Changes to treatment pathway can be accommodated and any changes can be viewed by all clinical teams in one space.
Radiotherapy	Limited time allocated to each clinic appointment means limited support and guidance given.	Sending a health needs assessment questionnaire via SMS text message allows the patient to return responses prior to their clinic appointment.	Having a completed, up to date health needs assessment available at the time of the clinic appointment allows for more meaningful discussions and better use of clinic time.

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Sarcoma	Multiple complex treatment pathways challenging and time consuming to record. Historic recording method has been to use paper diaries.	beetrootCANCER enables patient data to be recorded electronically and is available to view for all relevant clinicians. Patients are allocated specific monitoring pathways pertaining to treatment allowing bespoke pathways to be created and clinically agreed alerts to be set at specific points.	All relevant clinical teams can view every patient pathway and be kept informed of changes to treatment type or symptoms status allowing for better informed follow up programme.
Sarcoma	Significant amount of clinical time spent on administrative tasks.	Creation of specific alerts tailored to the follow up pathway of individual patients.	Alerts can be monitored and completed by an administrator with more complex incidences being escalated to clinical teams for review. This enables redistribution of workload and promotes appropriate use of clinician skills and time.
Skin	Complex pathway which sees a patient moving from one sub-speciality to another often resulting in duplication of workload.	Ability to stop a pathway and re-open under another sub-speciality with clearly recorded start and end dates.	Provides clarity to a complex pathway allowing user to clearly show which sub-speciality the patient is being treated under at a given time.
Skin	Duplicate bookings of surveillance scans, due to CNS teams being unclear regarding responsibility for surveillance schedules when patient moves between sub-specialities.	Allocation note present on key surveillance reminder alerts, set to clinically agreed pathway parameters.	Provides clarity regarding which team is responsible for surveillance at intervals throughout patients' surveillance pathway.
Testicular	Cohort of patients are a particular challenge to engage with surveillance schedule and complete key surveillance scans and blood tests along follow up pathway.	beetrootCANCER ensures contact is made with the patient on a regular basis, with letters generated to remind the patient to complete blood test and	Sustained, regular reminders carried out via the beetrootCANCER platform have reduced levels of DNAs and non-compliance leading to more consistent follow up pathway.

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		surveillance scan at set points along their follow up pathway.	
Urology (PSA)	Patients are unclear regarding their follow up pathway and may miss important blood tests due to this lack of clarity.	Personalised reminders sent to the patient inviting them to have a blood test at clinically set intervals along patient pathway.	Ensures the patient is informed when they are due a PSA blood test. This reduces confusion and ensures the patient feels appropriately regulated within a follow up pathway without the need for clinical input.
Urology (PSA)	Patients experience significant delays in receiving PSA blood test results due to lack of capacity in hospital setting.	Alert system identifies if a patient has had a blood test completed or not and alerts if the result has breached clinically set parameters. Alerts are personalised to each patient.	Patients can receive blood test results by personalised letter within a few days of having the blood test. This reduces anxiety for the patient and ensures they are informed regarding next steps along their tailored follow up pathway. Negates the need for a hospital attendance freeing space in overbooked clinics.
Urology (PSA)	The contradiction between supplying a patient with too much literature or not enough.	A bespoke link to information leaflets, websites and support groups, tailored to fit each tumour site.	Patients are sent the link via SMS text message and can choose to view as much or as little of the content as they wish. This encourages the patient to take ownership of their own recovery but also ensures they receive information through trusted sources.
Urology (Metastatic Prostate)	Limited capacity in overbooked clinics means some patients with a higher risk cancer diagnosis may experience delays in receiving blood test results and information regarding continuing follow up pathway.	Use of beetrootCANCER as a database in collaboration with continued clinical follow up provides a safe and robust platform to view clinically set criteria.	A shared care approach for patients with a higher risk cancer enables clinical teams to closely monitor patient treatment outcomes and ensures patients feel fully supported. Combining this approach with digital feedback supports real time review of crucial results and facilitates timely decision making.
Urology (Brachytherapy)	Clinical trial to investigate efficacy of rectal spacer insertion to reduce	Devised bespoke symptoms questionnaire to track and monitor outcomes after rectal spacer insertion.	Receiving responses directly to the beetrootCANCER platform has allowed seamless recording of symptoms and enables

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	incidences of damage to the prostate and rectum during radiotherapy.		focussed audits to be generated when required to investigate efficacy of treatment.
Non-CANCER			
Haematology (MGUS)	Difficulty in knowing the well-being of patients living with MGUS diagnosis and/or on waiting lists to see clinicians.	Enrol patients with a diagnosis/awaiting diagnosis on automated blood test surveillance.	Improve patient safety by gaining better visibility of their well being, and reduce pressure on waiting lists by ensuring that safety, using administrator-lead digital technology.
Rheumatology, Gastroenterology, Respiratory (DMARD)	Uncertainty as to a patient's stability prior to re-prescribing potentially toxic medications like DMARDs is risky and unsafe.	Set up automatic collection of blood tests, clinician-configured algorithms and enable an administrator-led monitoring service with clinical oversight of problems.	Gain better visibility of patients in the community and identify problems, disease deterioration before it becomes a problem. Automate the monitoring process with administrative help and save/divert clinician time towards higher value work.

Need more information or want a demonstration? Call 0800 756 1087 or audit@therapyaudit.com