

COPS CHRONICLE

JUNE 2026 - ISSUE 26

WHAT'S NEW



**Building
Carer Friendly
Communities**



Carers Week is led by Carers UK in partnership with a range of supporting charities and organisations across the UK



The aim of shining a light on the millions of unpaid carers who provide essential support to family members, friends and loved ones.



Contact Us



4TH FLOOR ROOM 30
BEATSON WEST OF SCOTLAND
CANCER CENTRE GLASGOW G12 0YN
TEL: 0141 301 9926 / 7137
EMAIL: GGC.COPS@NHS.SCOT
Please note that all outpatient referrals to COPS have now returned to the original email referral system. Referrals should be sent directly to:
GGC.COPS@NHS.SCOT

👍 Two Years of the COPS Newsletter

We have recently marked two years of the COPS monthly newsletter. Since launching in 2024, the newsletter has provided a platform to share patient outcomes, service developments, research activity, quality improvement work and resources relevant to older adults with cancer. Thank you to everyone who continues to read, contribute and support the work of the service.

💖👥 Recognising Carers Week 2026

June marks Carers Week, an annual campaign recognising the invaluable contribution of unpaid carers across the UK. Many patients seen within COPS rely on family members and friends to support appointments, medications, meals, transport and day-to-day activities. The team routinely works with carers to identify support needs, signpost to local resources and ensure carers feel informed and supported throughout a patient's cancer journey. [Click for more info on how you can show your support.](#)

📊 Realistic Medicine Conference 2026

We're excited to share that our poster has been accepted for presentation at the [Chief Medical Officer's Realistic Medicine Conference 2026](#). Selected through a highly competitive review process, the poster showcases the value of embedding occupational therapy within holistic, multidisciplinary cancer care for older adults.

GERIATRICIAN:
DR SEENAN

CLINICAL NURSE SPECIALIST:
TRACY DOWNEY

OCCUPATIONAL THERAPIST:
CARLY ROLSTON

TOPIC OF THE MONTH: THE HIDDEN IMPACT OF ANXIETY IN OLDER ADULTS WITH CANCER

Older adults with cancer commonly experience anxiety following diagnosis, treatment changes or uncertainty about prognosis. Anxiety can affect far more than mood. Within COPS, we frequently see anxiety contributing to:

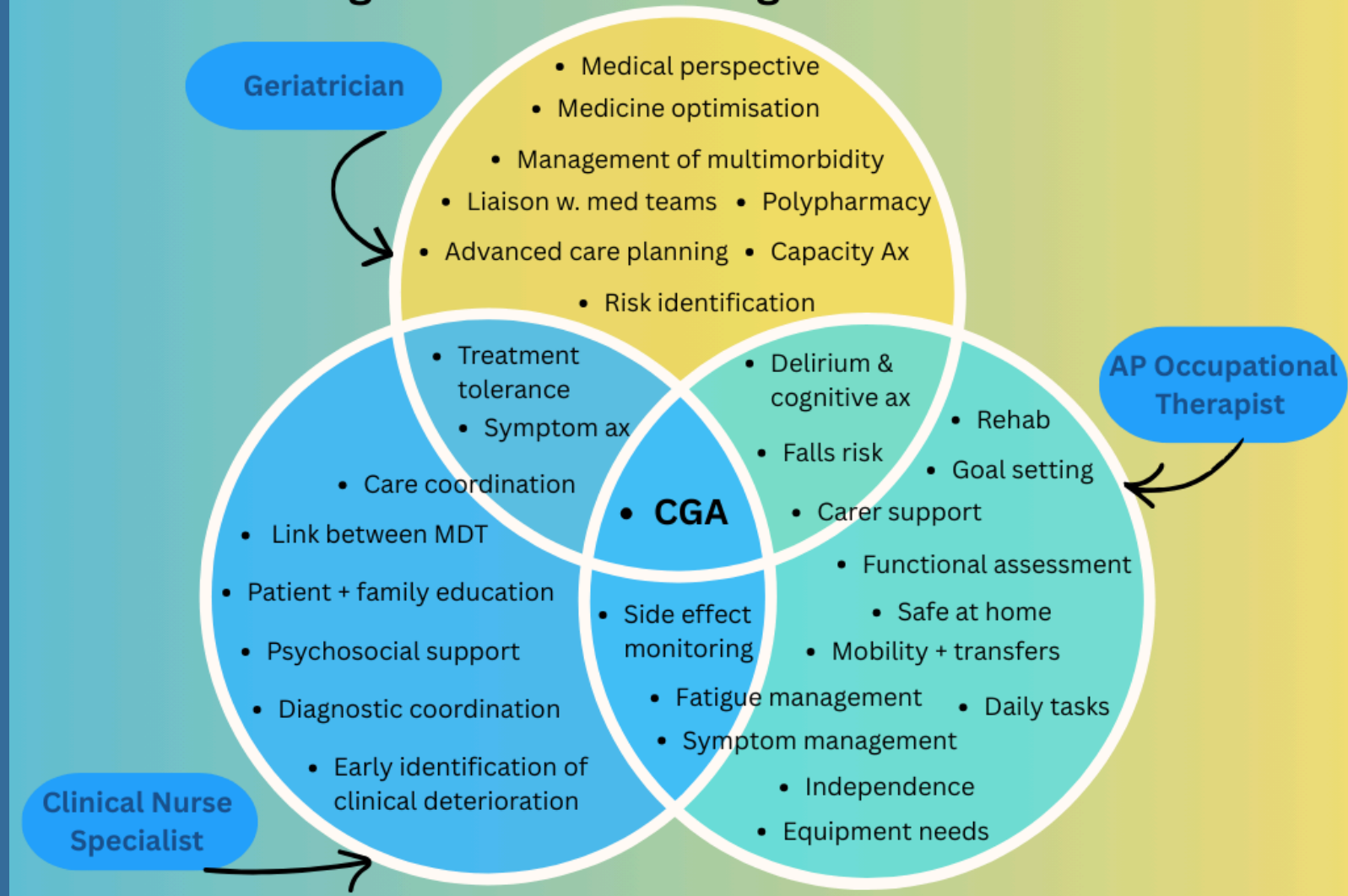
- Sleep disturbance and insomnia
- Reduced appetite and weight loss
- Difficulties managing medication
- Reduced confidence and mobility
- Social withdrawal
- Memory and concentration difficulties

These symptoms can sometimes be mistaken for disease progression, cognitive impairment or functional decline. Through comprehensive assessment, the COPS team works with patients and families to identify contributing factors and provide practical strategies, education, signposting and onward referral where appropriate.

This month alone, several patients were referred to COPS where anxiety was having a significant impact on daily functioning despite stable physical health. Supporting emotional wellbeing remains an important part of helping older adults live well with cancer. Within COPS, occupational therapy and nursing interventions focus on identifying how anxiety is affecting everyday function and treatment participation. Support may include fatigue and sleep management strategies, anxiety management techniques, medication and routine support, cognitive compensatory strategies, education around the relationship between mood and memory, signposting to community mental health services, social prescribing opportunities, befriending services, and support for family members and carers. For some patients, these interventions help them regain confidence to attend appointments, engage with treatment and maintain independence. For others, support centres around navigating major life transitions, anticipatory care planning, coping with uncertainty, and ensuring the right services are in place at the right time. By addressing the practical impact of anxiety alongside physical health concerns, the COPS team aims to support older adults to continue living well with cancer.

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Comprehensive Geriatric Assessment: Enhancing Cancer Care through MDT Collaboration



The G8 screening tool helps identify older people with cancer who may benefit from a CGA. At COPS, CGAs are holistic, considering frailty, function, mobility, cognition, mental health, medications, and social factors to develop a personalised care plan based on what matters most to the patient.

CGA AND ONCOLOGY - DOES IT HELP?

Evidence suggests that following a **CGA**:

1. Patient Outcomes are **improved**.
2. Patients are more likely to **complete treatment and experience less severe toxicities**.
3. The patient and team **produce problem lists** and **develop goal-driven interventions** to tackle these.
4. Hospital re-admissions are **reduced**.

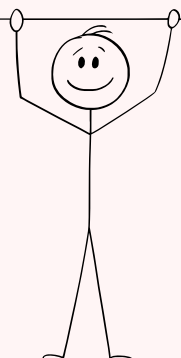
THE G8 GERIATRIC SCREENING TOOL

The total **G-8 score** lies between **0 and 17**.

A **higher** score indicates a **better** health status.

Not sure if your patient would benefit from CGA? A G8 frailty screen is a great starting point. COPS is happy to support, if you need.

YOU CAN DO IT



G8 questionnaire	
Items	Possible answers (score)
Has food intake declined over the past 3 months due to loss of appetite, digestive problems, chewing or swallowing difficulties?	0 : severe decrease in food intake 1 : moderate decrease in food intake 2 : no decrease in food intake
Weight loss during the last 3 months	0 : weight loss > 3 kg 1 : does not know 2 : weight loss between 1 and 3 kgs 3 : no weight loss
Mobility	0 : bed or chair bound 1 : able to get out of bed/chair but does not go out 2 : goes out
Neuropsychological problems	0 : severe dementia or depression 1 : mild dementia or depression 2 : no psychological problems
Body Mass Index (BMI (weight in kg) / (height in m ²))	0 : BMI < 19 1 : BMI = 19 to BMI < 21 2 : BMI = 21 to BMI < 23 3 : BMI = 23 and > 23
Takes more than 3 medications per day	0 : yes 1 : no
In comparison with other people of the same age, how does the patient consider his/her health status?	0 : not as good 0.5 : does not know 1 : as good 2 : better
Age	0 : >85 1 : 80-85 2 : <80
TOTAL SCORE	0 - 17

A **threshold** is suggested at **14 points**, meaning that a patient with a **score of 14 or lower** should undergo **full geri-evaluation**.

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HOW TO REFER TO THE COPS TEAM:

INPATIENTS: All referrals to be done on Trakcare.

**Beatson WOS Cancer Centre Patients Only*

ITEM LOCATION: CANCER OLDER PEOPLES SERVICE

*THERE ARE POSTERS TO ASSIST WITH THIS IN EACH DOCTOR'S ROOM



Please use the G8 screening tool (found in the **medical admission notes**) for every patient aged 65 years and older. A score of 14 or below indicates the need for further assessment. Please refer to the COPS team as soon as possible.

OUTPATIENTS:

For all outpatient referrals - please email GGC.COPS@nhs.scot with patient information, concerns, referral needs and cancer diagnosis.



PATIENT CRITERIA & WHAT WE DO

Referral Criteria

1. Aged **65 and over**
2. Attending the Beatson West of Scotland Cancer Centre (BWoSCC), **including umbrella clinics**, with a confirmed cancer diagnosis,
3. Patients presenting with **one or more frailty characteristics or complex comorbidities**, including:
 - Challenges with **activities of daily living** (ADLs)
 - **Falls** or high falls risk
 - Reduced or declining **mobility**
 - **Delirium**, cognitive change, or memory concerns
 - **Continence** issues
 - Treatment-related **side effects** impacting function
 - **Anxiety** or psychological distress affecting engagement or care
 - Palliative or supportive **care needs**
 - **Equipment** or environmental adaptation needs

A 'one-stop shop' supportive oncology and haematology service for older people with cancer and frailty. Our multidisciplinary onco-geriatric team provides holistic assessment and support, including medical review, symptom management, polypharmacy review, social support, equipment provision, and onward referral to hospital- and community-based services. We can see patients at any point in their cancer journey, including before, during, or after treatment, to support function, safety, and quality of life.