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Prehabilitation in Practice: Barriers and Facilitators to Engagement in the Cancer Treatment Outcomes Programme –Preliminary Results

Background: With prehabilitation's inclusion in the 2026 NHS National Cancer Plan, understanding barriers and facilitators to cancer prehabilitation from an individual to a systems level is vital to scale services. Since 2021, the Cancer Treatment Outcomes Programme (CTOP) has delivered high-quality multimodal prehabilitation across County Durham and Darlington, a rural and deprived community in the North of England.

Aim: This project is part of a larger evaluation of CTOP and prehabilitation services in the North East of England. It aims to assess barriers and facilitators to engagement in CTOP, considering the individual and systems level to inform future service delivery.

Methods: Two independent mixed-methods surveys for patients and healthcare providers (HCPs) were developed using the literature to identify commonly cited barriers and facilitators to prehabilitation. Both surveys were reviewed by cancer prehabilitation providers and cancer experts by experience to determine relevance and applicability.

Results: To date, 23 patients and 16 HCPs have responded to the survey. Patients reported few barriers to engagement, with other health problems and treatment-related side effects as the most common barriers to participation. HCPs identified logistical barriers (appointments and transportation) as the most common patient barriers. Both patients and HCPs acknowledged feeling overwhelmed due to diagnosis as a barrier to participation. Patients identified improved fitness, quality of life and support from HCPs as key facilitators. HCPs cited support from HCPs and reducing treatment complications as facilitators. At the systems level, logistical concerns were the primary barriers reported, including funding, capacity, and physical space.

Conclusions: These data suggest that patients and HCPs are willing and able to engage with prehabilitation programmes, but logistical concerns prevent the development and delivery of prehabilitation services. As all patients surveyed successfully participated in prehabilitation, additional work is needed to identify barriers and facilitators for patients who do not engage in prehabilitation.

Keywords

multimodal prehabilitation, barriers and facilitators, service delivery, mixed-methods

Conflict of Interest & Ethical Approval

yes

Abstract submitters declaration

yes

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