View results

Respondent

16 Anonymous

296:08
Time to complete

Title and contact details

1. Title of Initiative (please ensure this is a good description of your initiative in no more than 90 characters) *

Health coaching can improve the impact of late effects of a brain tumour

2. Name of organisation and region (please state context, ie general practice, community care etc) *

Kings College Hospital NHS Foundation Trust, London, Teaching Hospital.

3. Name of person or team involved in the self-care initiative *

Vicky Hurwitz

4. Timeframe and dates of initiative *

One year from July 2025 to July 2026

5. Contact name for entry *

Vicky Hurwitz

6. Contact email for entry *

victoria.hurwitz@nhs.net

About your self-care initiative

7. Describe the problem you were facing and your objective(s) in tackling this. (1200 characters max) *

Advances in treatment mean that increasing numbers of people with brain tumours are living longer, yet the incurable nature of the diagnosis has led to physical, cognitive and emotional deficits being accepted as inevitable. Follow up consultations focus on scan results and disease surveillance, with limited exploration of quality of life, late effects of treatment or general health. As a result, many patients experience unmet needs such as cognitive decline, weight gain, insomnia, fatigue, reduced confidence and difficulty returning to work, with little structured support available to address them. My objective was to identify individuals with unmet needs who were motivated to improve their health and wellbeing. By focusing on the four pillars of lifestyle medicine and personalised goal setting, I aimed to empower patients to manage the late effects of treatment, improve physical and emotional wellbeing, enhance self-management and ultimately improve quality of life. The initiative sought to shift conversations beyond scans and survival, ensuring patients' broader health goals and priorities became a recognised and valued part of their care.

Please enter at most 1200 characters

8. Outline your initiative, explain your planning and execution of the project. (1200 characters max) *

I developed a health coaching initiative within the Neuro-Oncology Late Effects Service to help patients identify and address unmet physical, cognitive and emotional needs. The intervention was patient-led, with no fixed number of sessions, allowing individuals to engage at a pace that suited their goals and circumstances. The project began with an invitation explaining health coaching and its potential benefits. To embed the initiative into routine practice, I established dedicated health coaching appointments within the electronic patient record system, creating protected clinic slots and a clear referral pathway. Sessions used a range of coaching tools tailored to individual goals, including lifestyle assessment, goal setting and behaviour change techniques. Recognising the cognitive challenges experienced by many brain tumour patients, each session was followed by a written summary and agreed action plan.

Please enter at most 1200 characters

9. What were the challenges and how did you overcome these? (1200 characters max) *

I initially offered coaching via an invitation to patients presenting to the service, but uptake was limited. In response, I adapted the approach and targeted invitations to patients who reported poorer outcomes on quality-of-life assessments completed in the Late Effects Clinic, enabling support to be directed towards those most likely to benefit. Another challenge was fitting appointments with patients lives and this has required flexibility on my behalf. Raising awareness fo the offering was also a challenge, as was explaining the concept. Health coaching is gaining momentum but is not a known profession within my area of the NHS so explaining the project and how it could help and why they would want to refer patients to the clinic was a challenge at times. With one patient it took a number of weeks to make any progress, they did not attempt their goals and within stretched resources a challenge was deciding what approach to take.

Please enter at most 1200 characters

10. Did you collaborate with other local partners, if so, who and why were they chosen? *

I collaborated with other services within the NHS and within the multi-disciplinary team in neuro-oncology to raise awareness of the patients progress. I collaborated with the neuropsychologist with patients where understanding more about their cognition was important to know how to help. I also collaborated with the Brain tumour Charity to refer on to their counselling service where appropriate to ensure the scopes of practice were clear. It hasn't been appropriate as yet to collaborate within any patients workplaces but this is likely to be a future partnership for patients wishing to return to work.

11. Would you describe your initiative as "innovative", if "yes" please tell us why. (800 characters max) *

IT moved beyond scan focused follow up to patient centred care. The project introduced health coaching into a specialist brain tumour service, offering a personalised, patient-led approach that empowered individuals to identify priorities, set goals and make sustainable lifestyle changes. The intervention was tailored to the unique cognitive challenges experienced by brain tumour patients through flexible appointments, written action plans and coaching tools adapted to individual needs. By integrating lifestyle medicine principles into routine clinical care, the initiative shifted the focus from simply living longer to living better, enabling patients to actively participate in improving their health, wellbeing and quality of life.

Please enter at most 800 characters

12. Did you use any of the Self-Care Forum's free resources as part of your initiative? Provide details *

I used the self care framework and the project was underpinned with the principles from the self care forum, focusing on self management, health literacy and empowering the patient.

Impact, outcomes, and evidence

13. Who was the initiative directed at and what were the benefits to the targeted group or individuals? (1200 characters max)

The initiative was aimed at adult brain tumour patients attending the Neuro-Oncology Late Effects Clinic in South East London. Patients were identified as having reduced quality of life through routine assessment within the clinic and were offered the opportunity to participate in health coaching. Engagement was voluntary, patients self-selecting by requesting an appointment. Reported benefits included increased energy levels, improved concentration and focus, better able to manage stress and its effect as well as reportedly reduced stress and anxiety, weight reduction, greater self-confidence and motivation, and a better understanding of how their brain tumour and treatment affected their daily lives. Patients also reported improved management of adrenal insufficiency, greater control over their health, and, for some, the confidence and ability to return to work. By empowering patients to develop self-management skills and take an active role in their health, the initiative helped improve quality of life and supported individuals to live as well as possible despite the ongoing challenges of an incurable diagnosis

Please enter at most 1200 characters

14. Please quantify the impact of your initiative. (e.g. cost improvement, numbers of people helped, time saved) ((1200 characters max))

The initiative has demonstrated significant impact for the 12 patients who engaged with health coaching to address the late effects of brain tumours. Patients reported increased energy levels, reduced fatigue, improved mood, lower stress and anxiety, greater self-confidence and motivation, and more positive personal relationships. Individuals also developed a better understanding of their condition and increased confidence in managing symptoms, including adrenal insufficiency. The coaching approach enabled patients to achieve meaningful life goals beyond health outcomes. One patient was able to return to full-time employment, removing the need for sick pay, while another gained the confidence and resilience to leave an abusive relationship. Participants reported a greater sense of control over their lives despite an incurable diagnosis. Clinical benefits included reductions in the use of pain medication and antidepressants among some participants. Anecdotally, patients also reported fewer GP appointments as their self-management skills and confidence improved.

Please enter at most 1200 characters

15. Do you have formal or anecdotal evidence of success? (e.g. qualitative, quantitative, informal feedback?) (1200 characters max)

100% of people benefitted from the coaching programme. 100% felt their quality of life improved with the coaching programme. This is reflected in the data collected using the tools, seeing an average improvement of 47.5% in quality of life. There was an average of 108% increase in quality of life and overall health scores. One patient reported “It has given me an understanding of thoughts and feelings and has given me the tools to deal with them better.” ”it (coaching) has really helped with everything I've been going through and the impact it has had on my ability to manage my lasting symptoms and health, as well as work, family life and friendships.” "These coaching sessions have given me a safe space to talk openly, understand my triggers, and develop practical strategies that have helped improve my confidence, wellbeing, and ability to cope with challenges."

Please enter at most 1200 characters

Learning and sustainability

16. What was the cost of this initiative in time, money, and other resources? Please be as specific as you can. (1200 characters max) *

my time was the biggest cost, I have had to adjust my job plan to accommodate this work. I have run all sessions online to reduce costs.

Please enter at most 1200 characters

17. Were there any learnings from the initiative, if so what were they? (1200 characters max) *

One thing that struck me is the power of giving people a focus on preventative as well as improving their health. The work has been really diverse, whilst there are themes the goals have been varied and evolving. My main learning is that more men have taken up the coaching offer than women and the men are from different cultural and professional background. The mean age is 43. I believe this is transferrable to carers and that this should be the next phase of the offering. In brain tumour care the person diagnosed is often significantly impacted and requires a lot of support from their carer / loved one. Coaching could enable a focus on their quality of life and own health. There are several examples in practice that I have sen where carers have put off their own health interventions due to the demands of their care roles.

Please enter at most 1200 characters

18. Are you continuing to implement the initiative, please give details. (1200 characters max) *

Yes. My next action is to present my work at EANO 2026 to the neuro-oncology community. I am integrating evaluations to gather more tangible feedback. The patient qualitative feedback offers the most power to me and this is overwhelmingly positive. I want to gather as much evidence as I can to demonstrate the benefit of personalised focused coaching on patients with brain tumours.

Please enter at most 1200 characters

And finally .....

19. How easy will it be to replicate your initiative and do you have top tips to share? (1200 characters max)

I think this could be easily replicated. I would suggest scoping your service through patient feedback to find out any unmet needs at different pathway stages and using publications such as finding myself in your hands by the brain tumour charity. The challenge is raising awareness of the offering, capturing the benefit to patients and their loved one and creating the time in busy job plans, for the patients it is worth every step that this requires.

Please enter at most 1200 characters

20. Please let us know the social media addresses of those involved in the initiative.

loveyourlife_healthcoach; linkedin.com/in/vicky-hurwitz-b75663199

21. Why do you think this initiative deserves to win the award? (800 characters max)

Rather than accepting physical, cognitive and emotional difficulties as inevitable consequences of an incurable diagnosis, it empowers patients to identify what matters most to them and take an active role in improving their health and wellbeing. Despite involving just 12 patients to date, the impact has been life-changing. Patients have reported increased energy, reduced fatigue, improved mood, greater confidence, lower anxiety and better relationships. Individuals have reduced their reliance on pain medication and antidepressants, returned to full-time employment, improved management of complex conditions such as adrenal insufficiency, and, in one case, gained the confidence to leave an abusive relationship.

Please enter at most 800 characters

22. Do you have an image, materials or weblinks to supplement your application? Please supply no more than 2 images which may also be used to promote your application if successful. Ensure images are square (ie height and width dimensions are the same). Please email information to selfcare@selfcareforum.org including the name title of your initiative (as in Q1).

I will email this

23. Your application may be chosen to be uploaded to the "best practise" page of the Self-Care Forum website to share self-care excellence with others who might want to use the learnings in your application. We will also include your email address so that people may get in touch with you. Please confirm your preference below. *

- (●) I am happy for the Self-Care Forum to add our entry to the website **with** my email address
- ( ) I am happy for the Self-Care Forum to add our entry to the website **without** my email address
- ( ) I would rather our entry was not included on the Self-Care Forum website

24. Would you consider becoming a self-care champion? *

- (●) Yes
- ( ) No
- ( ) Maybe, I'd like to know more