**London Cancer Breast Cancer Tumour Pathway Board Annual Report 2016-17**

**Introduction**

*London Cancer* incorporates the geographical areas of North Central and East London and West Essex with a population of 3.7 million.

*London Cancer* became part of the newly formed UCLH Cancer Collaborative in September 2016.

The Breast Cancer Tumour Pathway Board is a cancer care specific board led by a Tumour Pathway Director. Its membership includes representation from cancer professionals across the region and active participation from primary care and from patients.

The role of these pathway boards is to improve cancer care for patients, delivering an integrated care pathway that extends from presentation and diagnosis through to palliative care and living with and beyond cancer.

This has been another very busy and productive year for the board, focusing on improvements in the patient pathway and equitable access to services. I am immensely grateful for the engagement of the board members without whom this work would not be possible.

**Achievements this year**

2016/17 has seen the Breast Cancer Tumour Pathway Board become part of the newly formed UCLH Cancer Collaborative, part of the national Cancer Vanguard as part of the New Care Models programme of NHS England.

This year we have had a focus on understanding and reducing the variation that our patients currently receive across the breast cancer care pathway, with a particular focus on the metastatic pathway of care, treatment closer to home and stratified follow up for patients who have completed treatment. In the latter part of the year, we have been undertaking a gap analysis against the full pathway of care, to understand how to amplify current areas of good practice and opportunities for improvement. Innovative collaborations with industry have also been a theme for the board, with joint projects with Pfizer, Amgen and Quintiles supporting improvement work. The breast cancer nursing forum has also been very active leading on audit and service improvement work.

Our key achievements have been:

- Working with Pfizer on Metastatic Breast Cancer Pathway Redesign
- Working with the Chemotherapy Expert Reference Group and industry partners to develop a model for delivering chemotherapy closer to home
- Ongoing work with individual trusts to implement stratified Follow Up
- Conducting a gap analysis again the London Cancer Breast Cancer Service Specification to understand current variation in services
- Audit of services offered: prosthetic services, immediate breast reconstruction
- Gaining consensus and publicising guidance on Radiotherapy and Systemic Therapy

The UCLH Cancer Collaborative is a part of the national Cancer Vanguard, working with Greater Manchester Cancer Vanguard Innovation and RM Partners

www.uclh.nhs.uk/cancercollaborative #uclhcancer #cancervanguard
**Patient representation**

In 2016/17 we have benefited from two patient representatives on the board. Lesley Cousins and Patricia Dean have particularly contributed to the review of current services, and attended service review meetings at Trusts in North Central London to discuss opportunities for improving patient outcomes and experience.

“**It has been an interesting year attending the Pathway Board Meetings, particularly seeing the commitment of some the board members. As a patient rep I may not be able to contribute to all points on the agenda, but I feel that when I do have comments to make they are listened to and taken into account. Being able to visit some of the specialist units this year was an eye opener in regards to the different facilities and structure of meetings for the teams we met. I think 2017/18 will be more challenging for the board to make sure targets are met and the whole board move together to achieve what is needed.**” Lesley Cousins, Patient Representative

**Future plans**

In 2017/18 we will build on our work through working to address any gaps identified in our 2016/17 gap analysis, with a particular focus on patients’ first contact with our services, the surgical services offered and the metastatic pathway. Our work plan for 2017/18 is outlined below.

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<thead>
<tr>
<th>No</th>
<th>Objective</th>
<th>Owner</th>
<th>By</th>
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<tbody>
<tr>
<td>1</td>
<td>Improve the metastatic pathway in order to reduce variation including: - Ensure all patients with MBC have a named nurse specialist - Allow specific MDT discussion for MBC patients - Improve access to clinical trials and data capture</td>
<td>Rebecca Roylance</td>
<td>Trust action plans by September 2017</td>
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<td>2</td>
<td>Implementation of Early Breast Cancer Stratified Follow-Up Pathway and Recovery Package</td>
<td>Sharon Cavanagh</td>
<td>Trust action plans by September 2017</td>
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<td>3</td>
<td>Addressing any gaps against the London Cancer service specification</td>
<td>Rebecca Roylance</td>
<td>Plan to address gaps by September 2017</td>
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<td>4</td>
<td>Audit and service improvement to include an audit of the Risk Reducing Mastectomy MDM</td>
<td>Rebecca Roylance</td>
<td>Audit review in September 2017</td>
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<td>5</td>
<td>Improve research and access to clinical trials for early breast cancer</td>
<td>Rob Stein</td>
<td>Ongoing</td>
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<td>6</td>
<td>Develop a collection of metrics, including patient reported surgical outcomes to monitor the progress of the board</td>
<td>tbc</td>
<td>September 2017</td>
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**Acknowledgements**

We would like to thank all the members of the Breast Cancer Tumour Pathway Board for contributing their time to Tumour Pathway Board meetings and projects outside the meeting.

Particular thanks to our patient representatives Lesley Cousins and Patricia Dean who have generously given up their time to contribute.