

London Cancer Chemotherapy Expert Reference Group Annual Report 2017-18

Introduction

London Cancer incorporates the geographical areas of North Central and East London and West Essex with a population of 3.7 million. Since 2016, London Cancer has been one of the six principal programmes of the UCLH Cancer Collaborative

London Cancer includes 13 Tumour Pathway Boards and 7 Expert Reference Groups (ERGs), with the chemotherapy ERG led by Dr Martin Forster and Ms

Pinkie Chambers. The purpose of the Chemotherapy Expert Reference Group is to be the primary source of clinical advice for chemotherapy to Tumour Pathway Boards, other Expert Reference Groups, our constituent Trusts and UCLH Cancer Collaborative Board which includes commissioning representation.

The ERG's membership comprises multi-disciplinary representation from cancer professionals across the region and includes a clinician, nurse and pharmacist nominated by each trust to disseminate/implement the work of the group locally. The ERG's work is founded on active participation from primary care and patient representatives; currently the ERG has two patient representatives.

The ERG has a duty to promote equality of access, choice and quality of care for all patients within *London Cancer*, irrespective of their individual circumstances. We also work with cancer commissioners to provide expert opinion on the design of any commissioning pathways, metrics and specifications.

The group has continued to fulfil and exceed our network governance requirements. This has included developing systems for review of serious untoward incidents (SUI), treatment algorithms and chemotherapy guidelines and protocols. We have provided a forum for sharing local patient experience analysis allowing our members to have an increased perspective and fuller understanding of what is working well and should be replicated as well as where the gaps lie. In addition a number of improvement initiatives have been guided by the group, some of which are outlined below

2017/18 has seen the ERG complete or enter the closing stages of three 'pharma challenge' projects, in which we have partnered with the pharmaceutical industry to optimise medicines usage. Our three projects have each proven worthwhile and as such we will now spread the outputs and lessons learned across not just our patch but the whole of the NHS. Throughout the process we have gained an understanding of the key factors in a successful joint working partnership, experience we will bring to any future collaboration with industry.



Chemotherapy ERG Co-Chairs Dr Martin Forster & Ms Pinkie Chambers. Martin is a Consultant Medical Oncologist at UCLH and Pinkie is Lead Pharmacist, Applied Research at UCLH

Achievements this year

UCLH Cancer Collaborative brings together hospital trusts, GPs, health service commissioners, local authorities and patients across north and east London and west Essex.

We have successfully closed our 'Denosumab closer to home' project and will shortly be doing so for the 'Immunotherapy-related adverse events' and 'Out of hospital SACT delivery' projects. The outputs will be published on the national cancer vanguard website and UCLH Cancer Collaborative websites. The Denosumab closer to home was nominated for a HSJ Partnership Award. The projects have already led to a successful Darzi Fellowship application, with the successful candidate exploring expanding the role of community pharmacists and their input into cancer medicine prescription and delivery.

We would like to highlight that our patient representative, Katie Ruane is co-applicant to a research prize that will fund a researcher to explore the needs of patients taking oral anticancer agents that chemotherapy services should be meeting.

In addition to offering governance and guidance for all the Trusts across the ERG we have developed a mechanism for review of serious untoward incidents and 30 days deaths across the network. We will implement this in our 2018/2019 ERG meetings.

This year we have also had a focus on developing innovative new models of chemotherapy and new ways to optimise medicines usage.

Our key achievements have been:

- Publication of a simulation model and options appraisal document that have enabled NHS Trusts and commissioners to understand which delivery system of Denosumab and other subcutaneous drugs will work best for the local area.
- Agreement of a tariff for self-administered delivery of Denosumab in NCL. Our work has attracted national interest as such we have been offering advice and support to spread self-administration across the NHS.
- We have partnered with Amgen to create an options appraisal for delivering SACT chemotherapy closer to home. The options appraisal document (OAD) will be published by the summer of 2018.
- As part of the pharma challenge we developed with Bristol-Myers Squibb (BMS) a robust pathway and peer-generated set of recommendations for identifying and managing immunotherapy adverse events. These will be published in a report by summer 2018. The implementation of the report's recommendations will mean equity of care for patients receiving treatment and thus drive improvements in outcomes.
- Development of a pilot patient chemo counselling film. Lessons from the pilot will now feed into further work on group education sessions.
- 8 of our members completed a 1 day ISO:9001 standards course and 5 have completed the auditing course. ISO:9001 is a Quality Management System (QMS) standard focussed on helping organisations develop processes for continual improvements, streamlining their operations and reducing costs. UCLH's chemotherapy service is now applying to be ISO:9001 accredited, other Trusts are well positioned to follow, the ERG will support any Trusts that wish to do so.
- Pharmacy research UK/ BOPA research grant awarded to our patient rep to develop improved care for patients on oral chemotherapy
- Successful Darzi application to explore the role of community pharmacists.
- Development of mechanisms that guarantee the group meets the peer review requirements of a chemotherapy network.

Patient representation

Patients have continued to feed into our understanding as to the choices that should be on offer when moving chemotherapy services out of hospital. They have ensured the patient voice is heard during these specific and wider discussions.

The ERG is committed to enabling patients to drive our work. To make this possible we offer the practical and clinical support to patients as they lead their own initiatives such as the above mentioned research into the needs of patients taking oral anticancer agents.

Future plans

In 2017/18 we will continue to explore innovative medicines delivery as well as developing a kitemark which will help guarantee quality wherever chemotherapy is delivered. Our work plan is outlined below.

| No | Objective | Owner | By |
|----|--|------------------------|------------|
| 1 | Implement Denosumab self-admin across all our North Central London Trusts. | ERG Members | June 2018 |
| 2 | Implement Denosumab self-admin across all our North East London Trusts & support Princess Alexandra Hospital in Essex should they wish to join the roll-out. | ERG Members | March 2019 |
| 2 | Work with London colleagues to develop & publish pan London guidelines and protocols | Simon Cheesman | March 2019 |
| 3 | A working group to explore group education sessions to be established and develop a London Cancer position on group sessions. If necessary development of a toolkit support roll out | SE/Louise Edwards | March 2019 |
| 4 | Closing of the final 2 new pharma challenge projects | SE | June 2019 |
| 5 | Implement the recommendations of the managing immunotherapy adverse events project | SE/PC/ MF/ ERG Members | April 2019 |
| 6 | Review serious untoward incidents and 30 days deaths with the results guiding our work in improving chemotherapy service | ERG Members | June 2018 |

Acknowledgements

We would like to thank all the members of the Chemotherapy Expert Reference Group for contributing their time to Tumour Pathway Board meetings and projects outside the meeting.

Thanks in particular must go to Simon Cheeseman, Danielle O'Hana and Jenny Breslin for leading pharma challenge projects.

Special thanks to our patient representative Katie Ruane who has generously given up her time to contribute.