

London Cancer Chemotherapy ERG Annual Report 2018-19

Introduction

The Chemotherapy Expert Reference Group is a cross cutting group led by Co-Chairs Dr Martin Forster & Ms Pinkie Chambers, with project management support from Simon Evans. Its membership includes representation from a range of cancer professionals across the region with active participation from patients.

Chemotherapy services face consistently shifting challenges, one of the greatest of which is the introduction of new innovative treatments that prompt capacity pressures and the need to expand community administration. Over the past year we have helped services face these challenges, via our management of immunotherapy adverse events projects, by testing community pharmacy delivery and self-administration. In the next year we will ask our services to share data to help identify areas of best practice and areas of unwarranted variation. In this way we will ensure our services are robust enough to face the aforementioned shifting pressures.

Ms. Pinkie Chambers and Dr Martin Forster



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

This year we have published on our website the outcomes of our joint working initiatives with Amgen and Bristol Myers Squibb (BMS). We have begun the process of implementing the lessons learned, a process which will continue into next year.

Our key achievements have been:

- Out of hospital Systematic Anti-Cancer Therapy (SACT) options appraisal published. Following an extensive intelligence gathering exercises via interviews and workshops with experts we have published a comprehensive guide to delivering chemotherapy treatments outside of the hospital. The guide includes an options appraisal that lists the key elements, the benefits and the costs of various out of hospital services, such as home visits, a mobile unit and delivery in a community setting (e.g. pharmacies). The guide details the criteria for ascertaining eligible patients and treatments in use at successfully established services. The publication is relevant NHS wide.
- Managing immunotherapy adverse events guidance published. Following extensive national engagement the ERG published guidance and a suggested pathway for the management of immunotherapy related adverse events. Immunotherapies are a rapidly expanding element of cancer treatment, our guidance helps ensure that oncologists, pharmacists and nurses keep pace with best practice in caring for those patients who suffer adverse effects.
- Following up on recommendations in our guidance, training programmes around immunotherapy treatments have been instigated at UCLH and Royal Free, this ensures learning gained from the aforementioned project become embedded into routine practice.
- We have agreed a tariff across NCL for Denosumab self-administration. Denosumab is a drug given to metastatic breast cancer patients to reduce the risk of bone fractures. Self-administration can

occur in the home, saving patients journey and hospital waiting time and releasing capacity. Services are now in place at UCLH and The Whittington. North Middlesex will begin a service shortly.

- Template patient information and SOP for Denosumab self-administration have been developed. These will help our hospitals (and others across the NHS) to follow UCLH and the Whittington and realise the patient experience and capacity benefits.
- Our ERG members have participated in the development of pan London chemotherapy protocols. This will help remove unwarranted variation across London.

Patient representation

Thanks to Katie Ruane and Samixa Shah who have given up their time to act as patient representatives on our ERG, they have helped ensure our work is focused towards improving the care and experience of patients.

It has been very informative and interesting for me to be a patient representative on the chemotherapy ERG. I have found most of the discussions have been around the implementation of new practices and adverse events. As a patient representative, I have not always been able to have an input in these discussions since I may not have had any experience of these processes. In the coming year I wish to speak to patients who are undergoing chemotherapy or immunotherapy and bring those discussions to the group.

Samixa Shah, Patient Representative

Future plans

No	Objective [include expected outputs/impacts, how the objective will be measured and/or criteria for success]	Owner	By
1	Create a hub for sharing of local protocols and regimens	SE	June 2019
2	Create a process by which the ERG reviews and, where necessary, inputs on tumour specific guidelines	SE	December 2019
3	Establish a process to review 30 day death data across our services	PC/SE	December 2019
4	Oversee introduction of Dihydropyrimidine dehydrogenase deficiency (DPD) testing	All	April 2020
5	Work with our patient representative Samixa Shah on an exploratory piece of work around patient experience	SE/PC/MF/SS	April 2020

Acknowledgements

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