

London Cancer Living with and Beyond Cancer Implementation ERG

Date: **Tuesday 13th December 2016**

Venue: **Boardroom, 51 Wimpole Street, London, W1G 8YG**

Chair: **Sharon Cavanagh, ERG Chair**

1. Welcome, Introductions, Apologies and minutes of last meeting

SC welcomed members of the group, introductions were made and apologies heard.

Minutes of last minutes were confirmed.

ACTION:

- **Circulate presentations from previous meeting to the ERG**

2. London Cancer and the UCLH Cancer Collaborative Update (SC)

SC updated group on the UCLH Cancer Collaborative (UCLH CC) work programme and integration of this within the national Vanguard programme. There is a new UCLH Cancer Collaborative website which has blogs and quarterly updates - www.uclh.nhs.uk/cancercollaborative

Last Tuesday (6th Dec) NHS England released details of a Cancer Transformation Fund which aims to support local areas to deliver key recommendations of the Cancer Independent Taskforce; bids for this funding are due on 18th January 2017. Nick Kirby is leading on the vanguard side of the bidding and we hope to have a draft bid ready for 10th Jan 2017 for sign off by the Cancer Vanguard Board and local STPs. Bids are being requested to achieve improvements in early diagnosis, delivery of the Recovery Package and implementation of the stratified follow up pathways. LWBC prioritises include improving quality of life for patients and access to information to promote self-management and Health & Wellbeing events as well as rolling out treatment care plans for GP's. SC will email any relevant updates with regards to planning and how bidding process works before Christmas.

SC advised group member about the recent publication of the 'Achieving world-class cancer outcomes: A Strategy for England 2015-2016: One Year On; (NHSE, 2016). This to be sent out to the group along with a link to the original document published in 2015 by the Independent Cancer Taskforce.

ACTION:

- **Circulate transformation funding & cancer outcomes/taskforce recommendations documents**

3. London Cancer LWBC priorities and progress (SC)

SC talked through progress with the work plan.

Recovery Packages & HNA's

- 24% new patients in London Cancer have received a HNA (cf. 41% in Guys Cancer and Partners and 64% in RM Partners)
- Only one of our trusts is meeting our 70% target – 76% of new BHRUT patients received a HNA
- 16% of our patients attended a Health & Wellbeing event
- The number of treatment summaries provided to patients is still extremely low, currently at 5% but that has gone up from 3% last year

Implementing Stratified follow up

- NCL Cancer Board is developing a service specification and business plan to deliver a primary care led stratified follow-up model for stable men with prostate cancer. Due to be implemented in April 2017. This is being led by Barnet CCG with support from Transforming Cancer Services (TCST) and UCLH CC.
- Trusts in inner East London (Tower Hamlets, Newham, Waltham Forest, City and Hackney) have had one meeting to begin development of trust led solution for stratified follow-up for stable prostate cancer patients
- Outer East London: LB reported that they will be convening a meeting in January to begin discussions on implementing a trust led solution for stable prostate cancer patients

SC advised the group that *London Cancer* Recovery Package and Stratified Follow-up data are now being sent to the RM Partners Informatics Lead for collation (along with SEL ACN and RM Partners data) and analysis. This provides a pan-London picture of progress with implementation of these initiatives and enables trusts to compare performance against all other trusts in London.

4. TCST Update – Recovery Package and Stratified Follow-up Metrics

LP provided written update for SC to present to the group: At pan-London level, LWBC metrics are being reviewed. This led to a discussion re: metrics and data collection ensued.

Key points of discussion:

- Data collection methods need to be standardised across London as there is a great deal of variation at present. This was agreed and the next LWBC ERG meeting will be devoted to presenting robust methods of collections utilising CWT data. AVL agreed to present on model utilised at UCLH
- HNAs: SC advised the group that, in Q4, data will be requested for numbers of HNAs being conducted at end of treatment (to align with rest of London).
- Treatment Summaries: should be conducted within 6 weeks of end of treatment. AVL stated that UCLH don't collect this data at moment. SC welcomed suggestions on how we would go about collecting data on 6 week limit and stated that would take this back to the London metrics group for discussion

ACTION:

- **Discuss data collection in further detail at next meeting. AVL to present methodology utilised at UCLH**

5. Implementation of Treatment Summaries

SC has prepared stock presentation about Treatment Summaries (TS). It was recognised as a priority that the key points we need to convey to clinicians is that the rationale for implementation is for the benefit of patients.

Summary of recommendations to assist embedding of treatment summaries:

- Harnessing the CNS workforce – requesting that they encourage clinicians to complete
- Utilising support workers to upload, or ensuring the uploading, of relevant content onto the Cancer Registry system to ensure that the TS is pre-populated with clinical/demographic information.
- Pre-populating templates with as information on the form as possible so minimal data/text inputting is required. Encouraging dictation of the content is also effective but only when admin. is conducted on-site. (Some trusts are outsourcing this which leads to inaccuracies in content)
- Utilising a word document template in areas where clinicians not able to access Somerset and Infoflex.
- CNSs adding relevant content from agreed word template and then encouraging clinicians to sign off
- Engaging with administration teams early in the process of implementation
- Arranging regular forums/teaching sessions to discuss practical methods of implementation
- Clinical champions to drive the work locally
- Working with IT teams to problem solve solutions to make the process of completing the document as convenient as possible for clinical teams
- Arranging GPs to come and talk to clinicians about the importance of the document to assist them to manage the patient in primary care
- Case studies/quotes – focussing on the positive impact of patient care/experience

ACTION:

- **Circulate Treatment Summary presentation**
- **Group members to collate and share patient quotes/case studies from patients on how Treatment Summaries have benefited them**

6. Trust Level Updates

SC requested if any key points to handover to the group. Nil given.

7. AOB

SC – Q2 returns deadline was Friday 9th Dec. Q3 2016/17 Data is due on **10th Feb 2017**.

Document requests: Requests were made for circulation of the TCST 4-point model document and the *London Cancer* HWBE Specification. SC stated that would arrange for the web links/documents to be circulated to the group.

ACTION:

- **Circulate TCST CCR 4-point model document**

- Circulate *London Cancer* HWBE Specification

8. Future Meeting Dates:

Thursday 2nd March 10:00 – 12:00 Ground Floor Central Meeting Room, 250 Euston Road, NW1 2PG

ACTION LOG

| Action | Owner | Date Agreed | Status |
|---|---------|-------------|-----------------|
| Circulate presentations from previous meeting to the ERG | SC/RP | 13.12.16 | Done – 12.01.16 |
| Circulate transformation funding & cancer outcomes/taskforce recommendations docs | SC/RP | 13.12.16 | Done – 16.12.16 |
| Discuss data collection methodology in further detail at next ERG meeting. AVL to present methodology utilised at UCLH | All/AVL | 13.12.16 | Ongoing |
| Circulate Treatment Summary presentation | SC/RP | 13.12.16 | Done – 12.01.16 |
| Group members to collate and share patient quotes/case studies from patients on how Treatment Summaries have benefited them | All | 13.12.16 | Ongoing |
| Circulate <i>London Cancer</i> HWBE Specification | SC/RP | 13.12.16 | Done – 12.01.16 |
| Circulate TCST CCR 4-point model document | SC/RP | 13.12.16 | Done – 12.01.16 |

Attendees

| Name | Role | Trust/Organisation |
|----------------------------|---|--|
| Sharon Cavanagh (SC) | Lead for Macmillan Integrated Cancer Programme, Living with and Beyond Cancer and Allied Health Professionals | <i>London Cancer/UCLH Cancer Collaborative</i> |
| Alia Nizam (AN) | Cancer Services Pharmacist | UCLH |
| Avril van der Loo (AVL) | Macmillan Recovery Package Programme Manager | UCLH |
| Azmina Verjee (AV) | Recovery Package Project Manager | HUH |
| Carmel Devine-Judge (CD-J) | Project Lead, Macmillan Recovery Package | PAH |
| Daniel Thomson (DT) | Macmillan Primary Care Project Manager | <i>London Cancer/UCLH Cancer Collaborative</i> |
| Daphne Earl (DE) | Patient Representative | |
| Hilary Plant (HP) | Clinical Head for the Macmillan Support and Information Service | UCLH |
| Karen Phillips (KP) | Macmillan Lead Cancer Nurse | WH |
| Lucy Brooks (LB) | Macmillan Recovery Package Project Lead | BHRUT |
| Ogo Ojukwu (OO) | Macmillan Recovery Package Project Manager | BH |
| Roxanne Payne (RP) | Macmillan Project Coordinator | <i>London Cancer/UCLH Cancer Collaborative</i> |

| Name | Role | Trust/Organisation |
|----------------|---------------|---------------------------|
| Sara Zula (SZ) | Senior Matron | RFL |

Apologies

| Name | Role | Trust/Organisation |
|----------------|--|---------------------------|
| Liz Price (LP) | Senior Strategy Lead (Living with and beyond cancer) | TCST |
| Tee Fabikun | Patient Representative | |
| Linda Athey | Lead Cancer Nurse | HUH |