

Meeting of the *London Cancer* Rehabilitation Expert Reference Group

Date: **January 25th 2017, 15:00-17:00**

Venue: **Ground Floor Central, 250 Euston Road, London, NW1 2PG**

Chair: **Sharon Cavanagh ERG Chair**

1. Introductions

SC welcomed members of the ERG and introductions were made.

2. Apologies and review of action points from last meeting

SC read out apologies. The minutes of the last meeting were accepted.

3. London Cancer update: Vanguard and Macmillan Integrated Cancer Programme (SC)

- SC informed the group about the success of obtaining Vanguard funding for the UCLH Cancer Collaborative Vanguard Team until end of March 2018, this also applies to RM Partners and Greater Manchester Cancer. The result is very positive as the Cancer Vanguard Team can now carry on with the work they have been undertaking.
- In December 2016 NHS England released details of a Cancer Transformation Fund with £200 million funds available to cancer alliances across the country over a two-year period. This is to support implementation of the [Five Year Forward View](#) vision of better health, better patient care and improved NHS efficiency. This funding will enable local areas to deliver on key ambitions identified by the independent [cancer](#) taskforces. The UCLH Cancer Collaborative submitted bids to accelerate improvements in early diagnosis, and implementation of the Recovery Package and stratified follow-up.
- SC to feedback outcomes of application at the next Rehabilitation ERG
- SC is delighted to announce that Professor Mick Peake is now working with the centre for cancer outcomes team one day a week as clinical director.

ACTION:

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| <ul style="list-style-type: none">• SC to feedback outcomes of application at the next Rehabilitation ERG |
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4. Pan-London Commissioning Priorities for London – Rehabilitation developments (SC/All)

• Following on from AHP mapping in 2014/15 a number of issues regarding cancer specialist rehabilitation provision have been highlighted. In September 2016, SC and KR were invited to the pan-London Cancer Commissioning Board (CBB) meeting to present the findings of the mapping and recommendations to mitigate issues identified. CCB requested that SC and KR identify three pan-London priorities. The following were drafted and presented to the ERG for comment;

- 1. The lack of rehabilitation beds in the community**
- 2. Reducing variation in access to community rehab through service specifications**
- 3. Provision of pre-habilitation services**

- OM supported the first priority – stating that patients are often waiting 6-8 week to see community physiotherapists. OM proposed that it would be beneficial for patients to receive rehabilitation input on a short stay basis in a quick response rehab facility for two weeks then come back to secondary care for their chemotherapy (as appropriate).
- LF advised that there needs to be a reduction in length of stay for patients on wards, freeing up beds. High quality rehabilitation will support this. LF provided information about her teams successful bid for funding from Macmillan for an inpatient Neuro-Rehab facility that provides intensive Neuro-Rehab to 5-6 patients at a time that is relevant to them. Bart's are currently drawing up jobs and looking at community links and education as phase 1.
- FK explained a bedded approach is not always right for an individual patient and if there is an opportunity to enhance existing services practically then this should be explored.
- OM mentioned the successful 'virtual ward' model at RFH.
- CQ explained that St Joseph's Hospice train volunteers to visit people at home and support them with rehab exercise programmes rather than them visiting a gym. Importantly good nutrition underpins Prehab along with physical activity but dietetic provision is very varied. There needs to be more holistic thinking about Prehab, Rehab and death.
- The group suggested combining points 1 & 2 that focus on rehab and SC has invited suggestions for the final priority that can be added to Pan-London Cancer Rehabilitation Priorities for London. SC to send out presentation, if anyone has any ideas then it can be collated and added as new point. SC will utilise feedback from the discussion as a basis for discussion at pan-London level and for taking to the CCB.

ACTION:

- Circulate advert from Bart's for Neuro-Rehab Team (LF)
- Circulate Pan-London Cancer Rehabilitation Priorities for London presentation (SC)
- SC will update ERG on discussions that take place at CCB

5. Discussion on Cancer Rehabilitation Scoping Report completed by TCST (KR)

- KR presented an update on the TCST Cancer Rehabilitation Scoping Report.
- Task and Finish group met over a six month period to produce this report. T&F membership comprised multidisciplinary healthcare professional plus representation from TCST, service users, providers, commissioning, cancer delivery systems, and voluntary sector.
- A Stakeholder engagement event was held to inform the work. 53 people attended with a good mix of delegates but poor representation from commissioners and NC London least well represented. The day included presentations from a service user, TCST, NHSE, cancer delivery systems and Macmillan; group-work and networking. Delegates discussed issues affected by challenging economic climate including poor awareness of rehabilitation.
- Three focus groups with commissioners were held with 6 CCGs and NHS England represented. It was agreed that improvement in the commissioning of these services, sustainability and standardised language and scope are important needs.
- Commissioners want to see how rehab makes good cost savings and services need support in how they can start to demonstrate this as economic point of view is hard to link with the improvement of wellbeing in patients.
- TCST aim to develop an online tool with pertinent info-graphics to improve understanding of rehab, and how it links to consequences of treatment.
- KR aims to lead discussions on development of a workforce modelling tool. Frist step: setting up a steering committee meeting in March 2017.

- Lymphoedema guidance will be revised. KR welcomed any comments for inclusion within this. AF highlighted the difficulty with engaging commissioners as their main priorities are early diagnosis and cancer waits. It is important to have commissioning champions within system for lymphoedema.
- NHSE is developing a Quality of life metric. Due to be published in April. There will be workshops around this in Feb/March in London which we will circulate details of once released.

ACTION:

- Circulate invite for workshop on Quality Of Life Metric (KR)

6. Research Discussion with Introduction by Abi Fisher (Lecturer in Physical Activity and Health, Health Behaviour Research Centre, UCL)

SC introduced AF who is a principal researcher on a cancer programme grant carrying out the ASCOT study. ASCOT is a large scale lifestyle study for people who were diagnosed with breast, prostate or colorectal cancer that incorporates a trial of a lifestyle booklet and a guided telephone call with a research psychologist. The ASCOT intervention aims to provide information on healthy lifestyle guidelines, and using habits, help people find simple ways to make small changes in their daily routine. The advantages of the World Cancer Research produced guidelines around diet, exercise; smoking etc. in the booklet is that it is low cost, has simple lifestyle interventions and is based on behaviour changing theory.

ASCOT is the highest recruitment in any cancer trial in London cancer patch with 680 patients currently recruited, on baseline 3 and 6 months, with an eventual aim of 700-750 patients by the end of 2017. AF confirmed the team will start work on preliminary findings and analysis relatively soon.

This is a randomised-controlled trial that collects feedback from patients and the primary outcome is behaviour changes, it could be very important piece of work.

AF notified the ERG about UCL students who would be interested in placements or projects relating to rehab in trusts which would on completion involve them writing up an official research document. Project information would need to be inputted by summer so students could begin the project in October and it would not need to be cancer specific.

AF will circulate further information including a project template to the ERG.

ACTION:

- Circulate Abi Fisher's contact details and information on student placements within projects (SC)

7. Cancer transformation bid

SC provided overview in London Cancer update.

8. Workplan

SC has updated the workplan and this will be circulated to everyone. Of particular note, SC and RP are undertaking the next phase of the lymphoedema audit. The next tumour group of focus is melanoma. This will be followed by head and neck, colorectal, urology, gynaecology and sarcoma.

ACTION:

- Circulate updated January 2017 Workplan (SC)

9. Service Updates

No further updates than what has been previously discussed during meeting.

10. AOB

- AHP Action Transformation document was circulated this morning to members of the Rehab ERG for information
- AHP database – first step is underway to update the AHP mapping which was previously conducted in 2014/15. ERG members are requested to forward service information to Roxanne Payne (roxanne.payne@nhs.net).

Next Meeting: Tuesday 25th April 2017, 15:00 – 16:30 at 47 Wimpole Street, Basement Conference Room, London, W1G 8SE

ACTION LOG

Action	Owner	Date Agreed	Status
Feedback outcomes of application at the next Rehabilitation ERG	SC	25-01-16	
Circulate advert from Bart's for Neuro-Rehab Team	LF	25-01-16	
Circulate Pan-London Cancer Rehabilitation Priorities for London presentation	SC	25-01-16	Done
Update ERG on discussions that take place at CCB	SC	25-01-16	
Circulate invite for workshop on Quality Of Life Metric	KR/SC	25-01-16	Done
SC to circulate Abi Fisher's contact details and information on student placements within projects	SC	25-01-16	Done
SC to circulate updated Jan 2017 Workplan	SC	25-01-16	Done

Attendees

Name	Role	Trust/Organisation
Sharon Cavanagh (SC)	Living With and Beyond Cancer and AHP Lead	London Cancer/UCLH
Karen Robb (KR)	Physiotherapist	TCST
Abi Fisher	Lecturer in Physical Activity and Health	UCL

Name	Role	Trust/Organisation
Lindsay Farthing (LF)	Clinical Lead for Oncology Therapies	Barts Health
Orla McCourt (OM)	Specialist Physiotherapist	UCLH
Christina Moore	Lymphoedema CNS	UCLH
Louise Platt (LP)	Therapy Team Lead Neurosurgery	UCLH
Fiona Kelly	Head of Adult Therapies	Homerton
Melissa Millman	Specialist Women's and Men's Health Physiotherapies	Homerton
Claire O' Herlihy	Highly Specialist Occupational Therapist	Royal Free
Caroline Quilty (CQ)	Specialist Dietitian in Palliative Care & Oncology	St Joseph's Hospice
Daniel Thomson	Macmillan Primary Care Project Manager	UCLH
Suzette Ferreira	Clinical Lead OT	BHR
Hannah Hughes	Physiotherapist in the Orthopaedic Oncology	RNOH
Antony Perryman	Occupational Therapist	UCLH
Kassie Montanheiro	Haematology and Oncology Dietician	UCLH
Katie De Albuquerque	Physiotherapist	UCLH
Victoria Todd	Breat Cancer Lymphoedema Clinic Director	Royal Free
Roxanne Payne	Project Co-ordinator	London Cancer/UCLH

Apologies

Name	Role	Trust/Organisation
Teresa Hill	Lymphoedema Nurse Consultant	Forest Primary Care Centre
Jennifer Gilbert	CNS Lymphoedema	UCLH
Kay Eaton	CNS Lymphoedema	UCLH
Kathy Wisbey	Occupational Therapist	Homerton Hospital
Barbara Stead	Lead Physiotherapist	Royal Free
Ruth Carr	Clinical Specialist Manager	RNOH
Charlene Walters	Senior Physiotherapist	Barts
Diana Markman	Site Lead for Dietetics	Barts
Lisa Lomas	Therapy Manager for OT and PT	Queens
Shezana Malik	Head of Dietetics and SLT	Whittington