

OG National Cancer timed
Pathway Event

4th June 2019

**Lessons Learned from Previous
National Pathway Implementations**

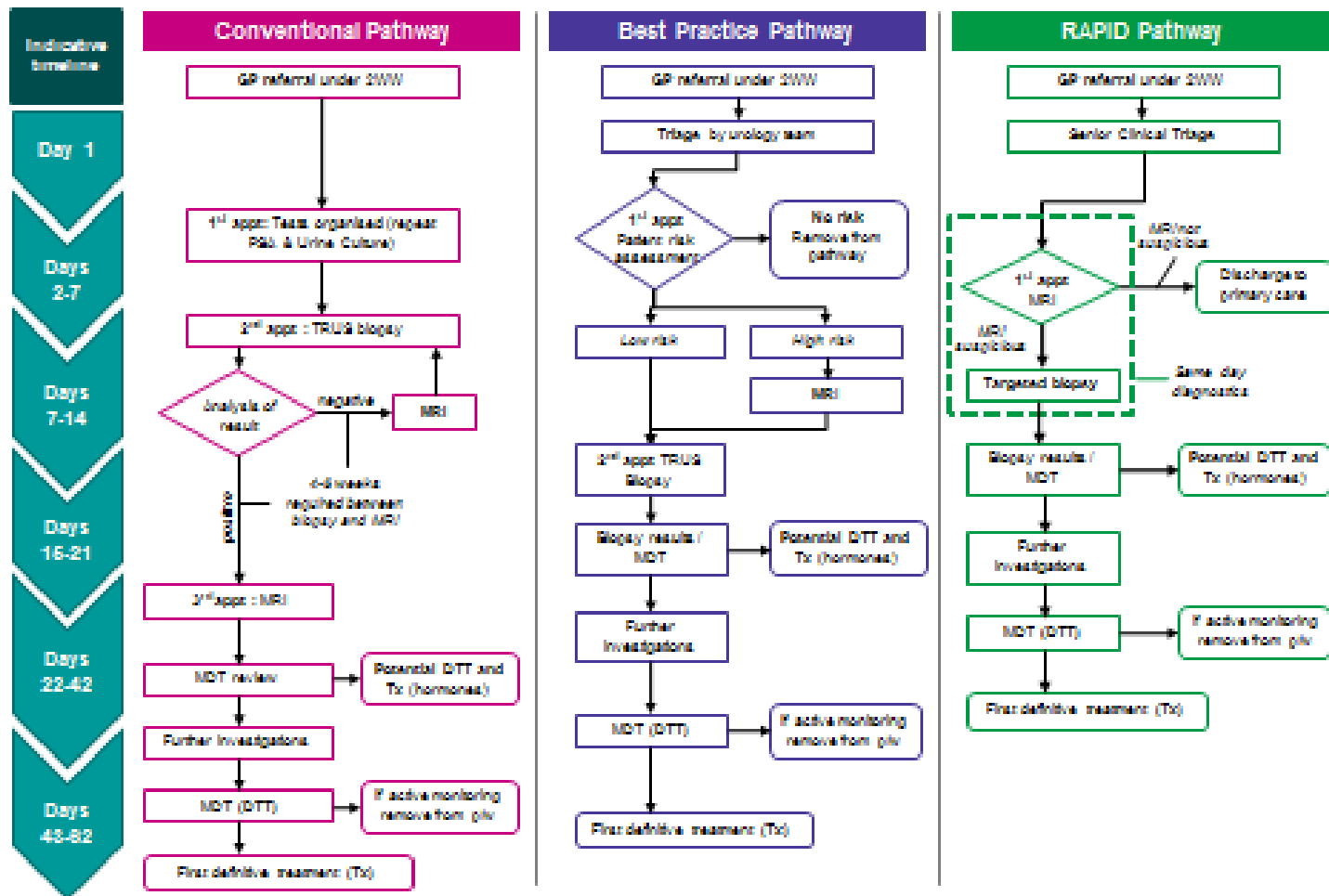
Liz Rippon

UCLH Cancer Chief of Operations

- My background and experience
- Hearts and minds & systems and processes
- It has to be the right clinical solution. Interrogate and understand the data, to ensure that we use it to make the right decisions
- Performance does matter
- Changes must make **operational** sense to be sustainable
- Don't be afraid to go further than the 'best practice' pathway. Use this money and transformation opportunity to make the right changes for your patients
- Communication, equality of access, ease and simplicity for patients and primary care
- Ensure that transformation is done in harmony, eg seasonal pressures and difference in provision across organisations

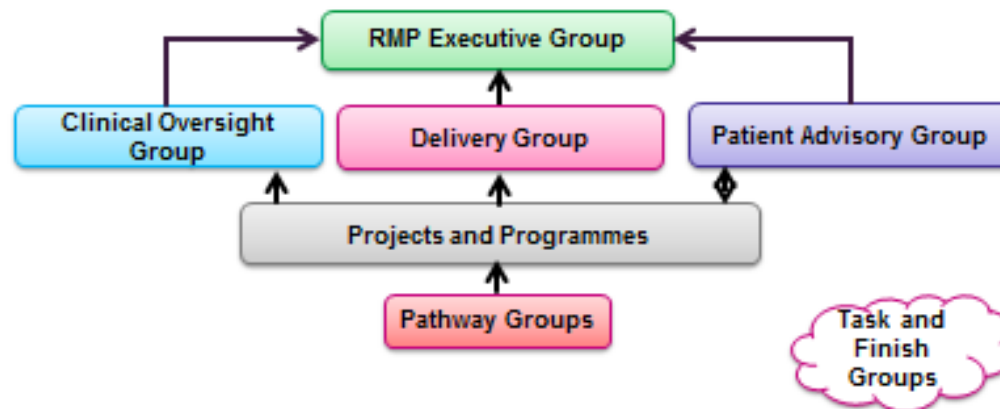
RM Partners Prostate - comparison of different pathway models

Accountable Cancer Network

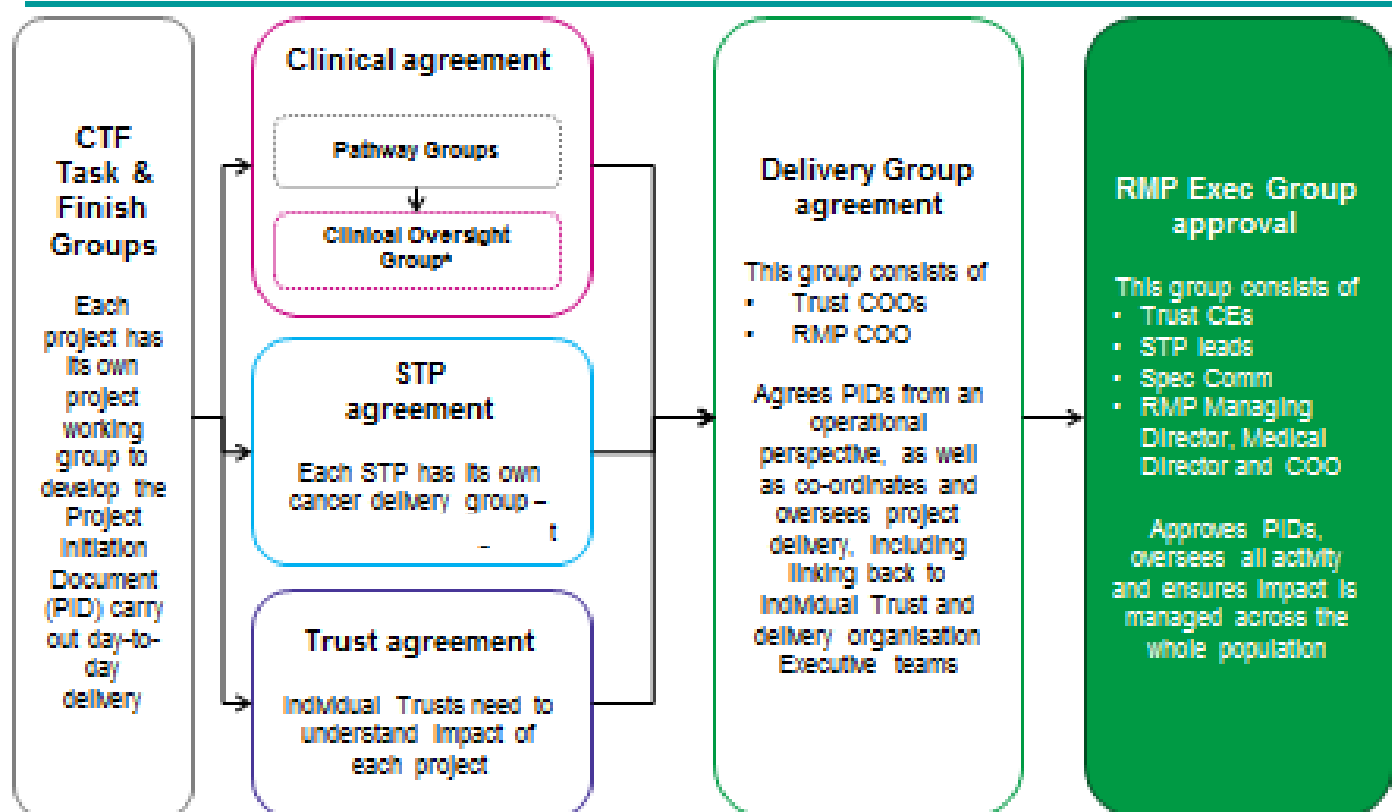


The Blue Print

- Governance



- Programme machinery (money!) uniting the tribes
- Project Initiation Documents and Communications material
- Highlight reports, exception reporting, risk and mitigation, cross cutting themes. Results focussed



* COO has delegated responsibility of all active PIDs (under \$100K) to a sub-group of the day, managing Director and one other representative from COO

The Approach

- Influence and openness
- Gap analysis and identifying the real resource required not just to implement but to maintain in a sustainable way
- Make it cost neutral, or a saving, or start the business case signalling really early on
- Celebrate successes
- Combine projects to maintain momentum
- Results, results, results! Writing up our experiences and learning and ensure that transformation money is put to good use and that we share our learning
- Fairy Godmother service!

OG Pathway

