



**Healthy London
Partnership**

**MACMILLAN
CANCER SUPPORT**

Personalised Care for Cancer: Next Steps Event

Transforming Cancer Services Team 12 February 2020

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**LONDON
COUNCILS**

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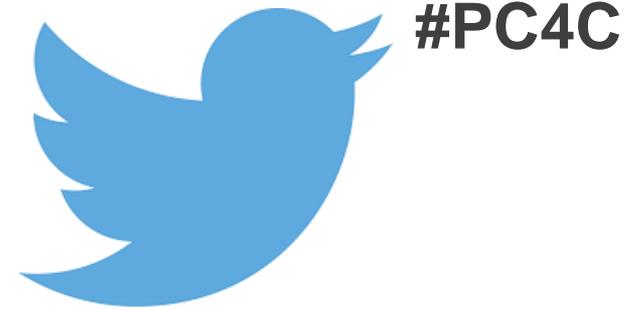
London's NHS organisations include all of London's CCGs, NHS England and Health Education England

Today's agenda

Time	Item
09:00-09:30	Arrival and Registration
09:30-09:40	Welcome & introduction
09:40-09:45	Words from Macmillan
09:45-10:25	The journey so far
10:35-10:50	The future state
10:50-11:10	The patient's voice
11:10-11:30	Coffee break
11:30-12:30	Group exercise: STP reflections and action planning
12:30-13:00	Peer feedback
13:00-13:20	Plenary discussion
13:20-13:30	Final remarks/Next steps



Housekeeping



@TCST_London
@SWLNHS
@macmillancancer
@HealthyLDN



Today's objectives

1. Stakeholders will be involved in designing and committing to the development of four London projects funded by Macmillan Cancer Support - primary care nursing, lymphoedema, cancer rehab and psychosocial services – this will be within the context of their Long-Term Plans, local data, and London wide recommendations.
2. Stakeholders will know how to use the range of products TCST and SWL STP have produced, with plans in place to pick up workstreams without TCST leadership and support.
3. STPs will know about good practice elsewhere and receive peer feedback on their local plans across the four workstreams.
4. TCST (Early Diagnosis, Cancer Waits and Diagnostics workstreams) will have a greater understanding of the work that has been done by the Macmillan projects, and will consider ways to implement and integrate elements within their workstreams across London.

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**TO HELP EVERYONE WITH CANCER
LIVE LIFE AS FULLY AS THEY CAN**

Emma Tingley

Strategic Partnerships Manager (London)

@Emma_Tingley

01

What is the journey so far?

Sandra Dyer Macmillan Primary Care Lead
Nurse (South West London STP)

Philippa Hyman Macmillan Mental Health
Clinical Lead (TCST)

Karen Robb Macmillan Cancer Rehabilitation
Health Clinical Lead (TCST)



South West London

Health & Care
Partnership

Macmillan Primary Care Nursing Project

Presentation to Personalised Care for Cancer: Next Steps for London

Sandra Dyer Macmillan Primary Care Lead Nurse

Email: Sandra.dyer@swlondon.nhs.uk

In the beginning...

Cancer Care Reviews and Prostate Cancer Follow up

Nurses completing the Macmillan course but little change in practice – confidence and competence.

Some examples of excellent practice that are replicable

Community Nursing

Focus of the DN/community nursing role focussed on EOLC with little recognition of potential to support those living with cancer

Education and training

Training Needs analysis- Over 70% were not confident in completing a CCR

Over 70% of respondents had not received any training specific to cancer, of those who had, the majority related to screening services.

Cancer as a long-term condition not featured on post reg programmes for GPNs or community nurses

Barriers

Lack of protected learning time for GPNs

GPs not necessarily seeing value of CCRs for patients

Workloads and wide variation in roles

Community nursing roles task driven

Patient Partner Involvement

- Recruitment
- Steering Group
- Education
- Focus groups
- Video
- Podcast



L-R: Christine, Bonnie, Sharon & Lindsay





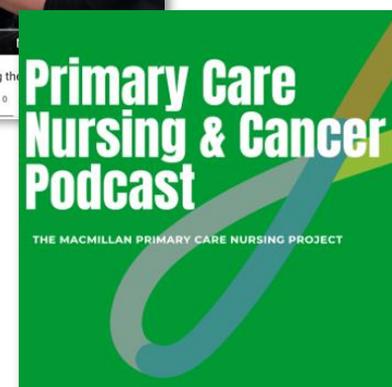
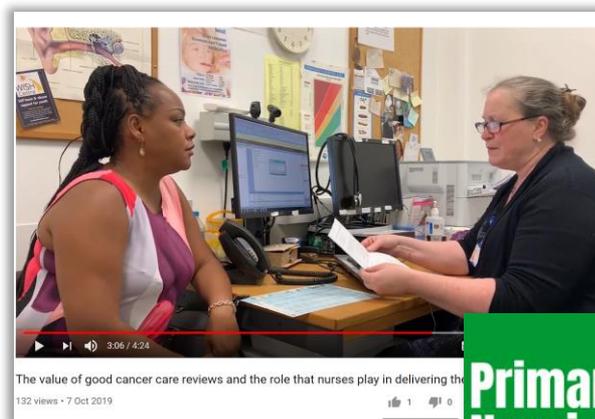
Bonnie Green

Cancer Patient Partner
SW London

Macmillan Steering group member -
Primary Care Nursing Project

Developing resources

- Influencing content of post-graduate education for GPNs
- Developing resources for education and influencing – videos, webinar and podcasts
- Taster sessions - cancer as a long-term condition
- Community of practice for GPNs in cancer care.





Joanne Powell

Senior Lecturer in General Practice Nursing
Kingston University and St Georges University London
Steering group member- Macmillan Primary Care
Nursing project

Impact so far?

Leadership and Influencing

General Practice Nursing

GPNs – Taster Sessions

Developed a Community of Practice for cancer for GPNs

Podcast – showcases examples of good care

Train the trainer approach to education

Input into Macmillan's developing education offer for primary care

Showcased work pan London, and nationally.

Spread- Macmillan committed to funding roles in each STP to build on this work

Community Nursing

Developed and successfully ran Cancer in the Community course for community nurses (CLCH academy)

HEE funding, now available across London in 2020

Community nursing leaders – cancer is a long-term condition

CLCH want cancer as core education for their nurses and other staff.

Impact so far? cont....

Leadership and Influencing

Developing Education and training

TNA being rerun and will input into evaluation

Universities – cancer as a LTC now in timetable for GPNs

Worked with Capital Nurse to input into a QIS for GPNs - cancer knowledge seen as essential- this will influence future commissioning of post grad course.

Overcoming Barriers

We've worked with training hubs to deliver multi professional education

Aligning to NHSE 10-point plan for GPNs - demonstrating value of GPN role and potential for role development

Exploring opportunities for new rotational programmes with HEE

Demonstrating value of nurse led care - patient experience.

In partnership with

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Dr Owen Carter

Macmillan GP and Cancer Clinical
Lead Wandsworth
SW London

Steering group member – Macmillan
Primary Care Nursing Project



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Delivering excellent psychosocial support for adults affected by cancer in London

Dr Philippa Hyman,

Macmillan Mental Health Clinical Lead

philippa.hyman@nhs.net @drphilhyman

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Why is the psychosocial support for cancer work so important?

- Establishes **parity of esteem** so there is the same level of attention paid to mental health as physical health within cancer care. ((**No health without mental health, 2011; NHS Mandate, Five Year Forward View for Mental Health, 2016 FYFV, NHS Long term plan, 2019**).
- Psychosocial factors, if not addressed, negatively impact on uptake of cancer tests/investigations, treatment adherence, rehabilitation, self-management and quality of life resulting in poorer outcomes.



- Cancer and its treatments have the potential to significantly impact on mental health, physical health and socio-economic status in multiple ways.

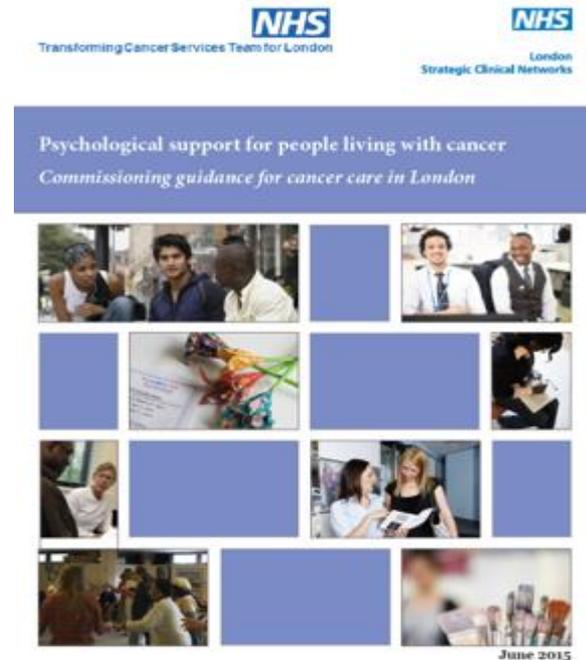
- 58% of people diagnosed with cancer feel their emotional needs are not looked after as much as their physical needs (Macmillan, 2006)



- Cancer patients have a 55% higher risk of suicide than those without cancer (Calati et al, 2017)

In the beginning

- Recognition across London that the psychosocial needs of those affected by cancer were not being adequately met, with confusion regarding when, how and where to refer.
- Uncoordinated, disjointed and poorly understood services across London
- What was needed: an integrated, whole, pathway to improve patient experience and clinical outcomes which would make sense to service providers, service users and commissioners.
- A Pan London Macmillan Funded role was developed:
 - to ensure that a pathway was designed
 - To deliver excellent psychosocial support from
 - diagnosis, through treatment, living with and beyond cancer
 - and end of life care.



Service user engagement and pathway co-design central to this work

- Interviews with young adults in their 20's and 30's (via Trekstock Cancer charity that supports young adults)
- Focus groups (held pre-large events)
- 3 Stakeholder events (overall attendance 210 with representation of service users at each event between 16-17%)
- Representation on TCST Psychosocial support and cancer steering group
- Patient Advisory Groups
- National Cancer Patient Experience Survey (NCPES 2017)

“In primary care I was seen within an IAPT service, there was sympathy about cancer but a lack of understanding”

Analysis of London eHNA data (2018):

- Worry, fear or anxiety is top concern across all age ranges.
- Across all tumour types only 32.8% of service users in London had a care plan.

“There’s a disconnect between services in the hospital between physical/medical side and the psychological side.”

“During treatment I was told I could see a psychologist, which was so helpful, but after treatment it doesn’t feel like it’s offered”

Introducing Daphne Earl

- Patient representative
- Member of the Mental health and cancer task and finish group (January 2017 - December 2017)
- Member of the Psychosocial support and Cancer steering group (January 2018 - present)

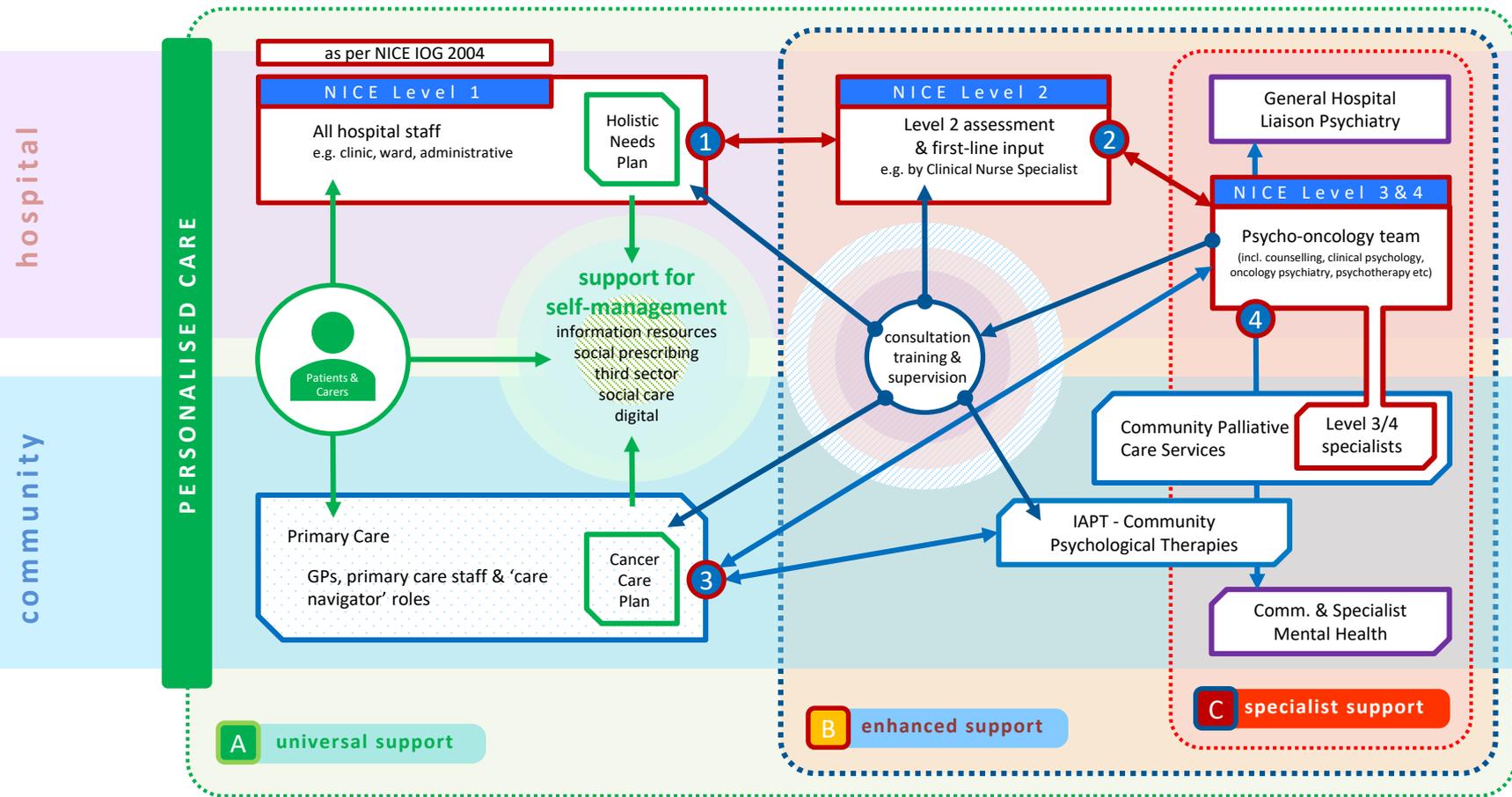


Products co-produced through extensive stakeholder engagement

- Commissioning guidance on Psychosocial support (published May 2018)- ***has had impact within and outside London***
- Mapping of cancer psychological services in London (November 2017)-***data has been used to inform commissioning decisions e.g across NWL and SWL STPs.***
- London Integrated Pathway for Cancer Psychosocial support-***has already been localised across several CCGs in London***
- Business case to support the implementation of the pathway and the development, where needed, of psycho-oncology services (published February 2020)
- Service specification for pathway implementation and the development of Psycho-oncology services (published February 2020)
- Refreshed Commissioning guidance for Cancer Psychosocial support (published February 2020)
- Refreshed Pan-London Mapping of Psycho-oncology services (February 2020)

Impact so far

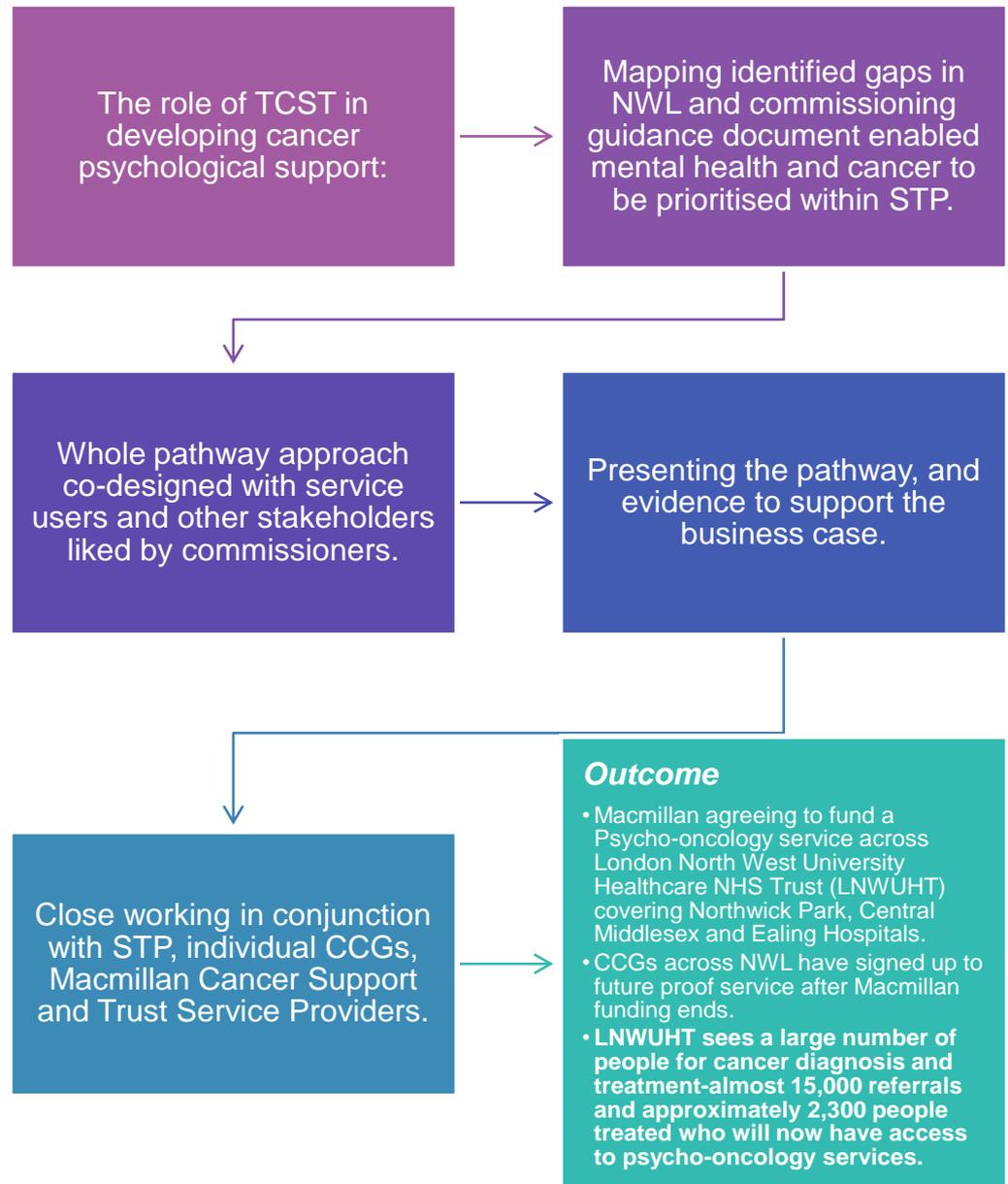
LONDON INTEGRATED PATHWAY FOR CANCER PSYCHOSOCIAL SUPPORT



Several examples across London of the pathway having been localised

- Examined activity data and what is working well along the pathway for psychosocial support for cancer
- What relationships need to be developed/strengthened across the **whole** pathway
- Local groups formed across primary care, IAPT services and psycho-oncology.
- Clarified local referral criteria for services
- Embedded into the pathway information on local services, resources, including web links

**Partnership
working
essential to
success:
Case
example
NWL STP**



Case example: South West London STP

Mapping carried out in November 2017 identified significant inequity in provision of psycho-oncology services across the SWL STP

Partnership working with TCST, service providers and commissioners to support an STP wide model

All SWL CCGs have agreed to contribute to the Cancer Psychological Service (CaPS) at St George's Hospital, who had an uncertain future after Macmillan funding ended in March 2018.

Further funding agreed to develop services in Croydon

Ongoing work to further develop capacity to deliver the London Integrated Pathway for Cancer Psychosocial support across the STP

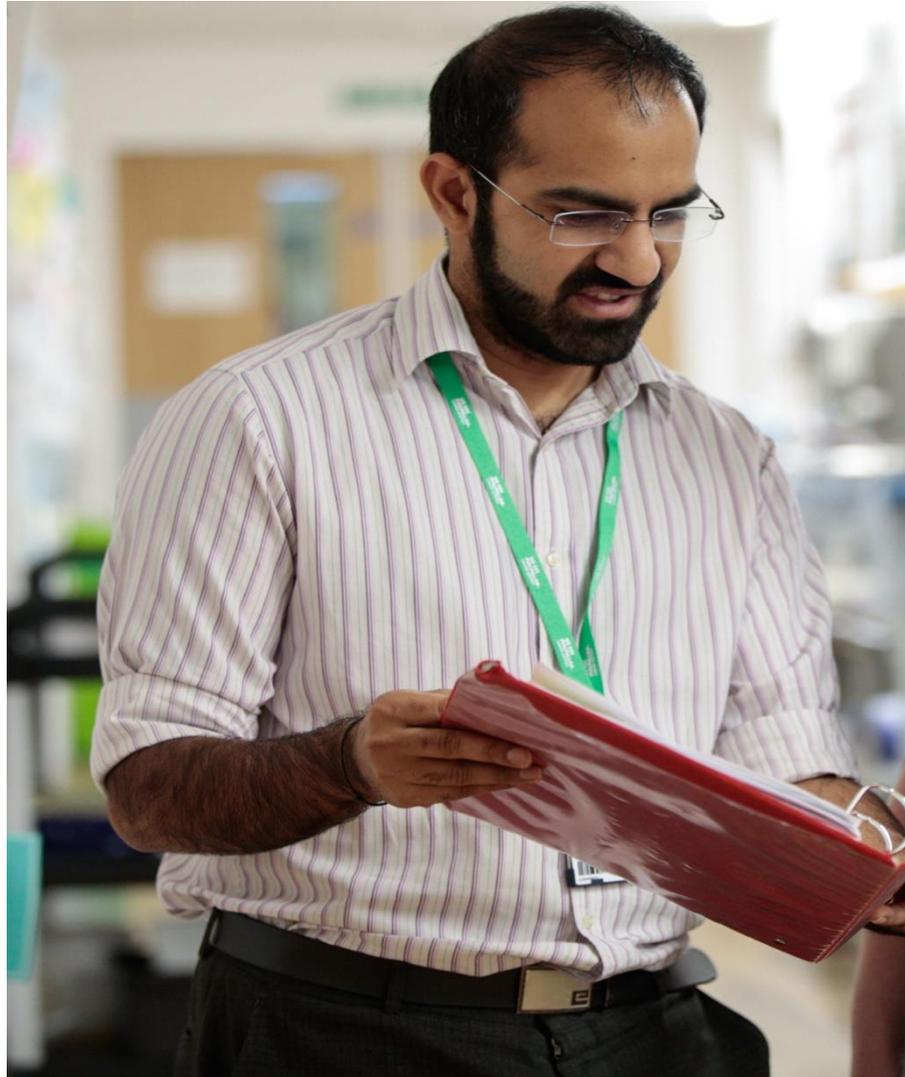
Introducing Andre Chagwadera

Programme Manager-Cancer, South West London Health and Care Partnership



Introducing Dr Sahil Suleman

Macmillan Consultant Clinical Psychologist (St George's Hospital)



Recommendations

**Commissioners
and system
leaders are
asked to:**

1. Adopt the proposed London Integrated Cancer Psychosocial Care Pathway

2. Localise the pathway by mapping current resources, supporting partnership working and identifying gaps at STP/ICS level.

3. Where there are no or very limited psycho-oncology teams, allocate sufficient resource to ensure that a Psycho-oncology service is available to ensure that the outcomes indicated in the pathway are delivered.



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Lymphoedema Guidance for adults living with and beyond cancer

Dr Karen Robb

Macmillan Rehabilitation Clinical Lead

Transforming Cancer Services Team, London

karen.rob3@nhs.net @KarenPhysio

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In the beginning (since 2015/16)

- England had no national strategy for lymphoedema.
- **Economic impact of poor management known to be considerable:**
 - **England spending more than £178 million on admissions. Estimated that for every £1 spent on lymphoedema services, the NHS saves £100 in reduced hospital admissions.**
- Lymphoedema prioritised in the '*5 year Cancer Commissioning Strategy for London (2014)*' and had been in commissioning intentions for the last 4 years.
- Known variation in service provision and workforce challenges.
- Prevalence expected to rise.

Patient and Public Involvement

- Interviews with commissioners to understand what would be helpful in a Guidance document.
- Steering Committee convened including:
 - TCST
 - Clinical experts from across the UK
 - Service users
 - Commissioners
 - Third sector.
- **Tasked with identifying:**
 - **What good looks like**
 - **How it should be commissioned**
 - **Ongoing profile and awareness raising.**



Introducing Karen Friett...

Chief Executive, Lymphoedema Support Network (LSN)



Our resources – Guidance and Business case



NHS

**Commissioning Guidance for
Lymphoedema Services for Adults
Living with and Beyond Cancer**

Transforming Cancer Services Team for London
August 2016

Healthy London Partnership ¹

The image shows a diverse group of people of various ages and ethnicities, including a person in a wheelchair and a person pushing a stroller. The NHS logo is in the top right corner of the illustration.



Healthy London Partnership

**Lymphoedema services for adults
living with and beyond cancer**

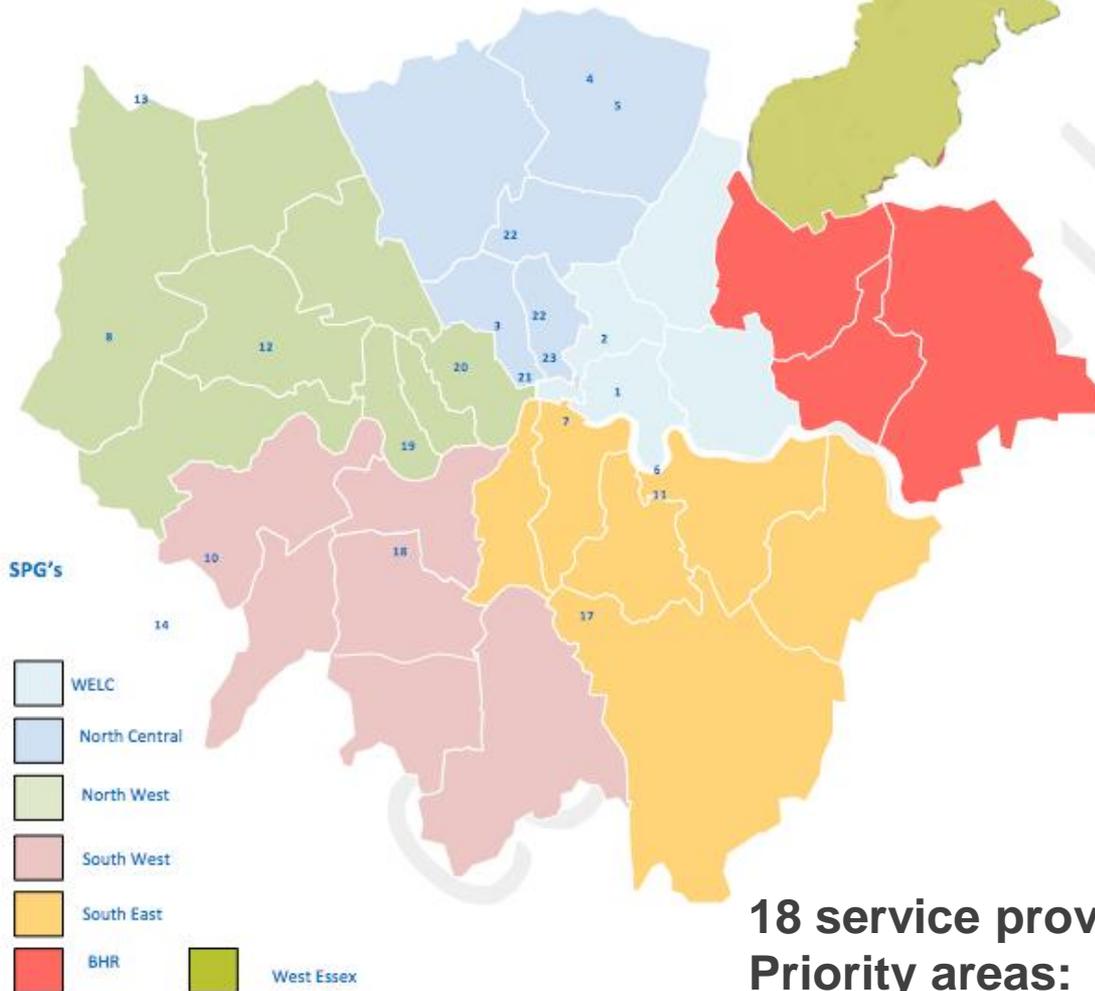
A template business case for commissioners

June 2017

The image shows a diverse group of people of various ages and ethnicities, including a person in a wheelchair and a person pushing a stroller. The Healthy London Partnership logo is in the top right corner of the illustration.

Our Resources - Mapping of services

Lymphoedema Service Map



Name of Service
1. Accelerate CIC a) Mile End Hospital
2. Accelerate CIC b) St Joseph's Hospice
3. Cancerkin lymphoedema service
4. Enfield Macmillan Lymphoedema Service AT The Nightingale Cancer Support Centre, Enfield
5. Enfield Macmillan Lymphoedema Service, Forest Primary Care Centre
6. Greenwich and Bexley Hospice Lymphoedema Service
7. Guys and St Thomas Lymphoedema Service
8. Harlington Hospice
9. Herts and Essex Community Trust Lymphoedema service
10. Hounslow and Richmond Community Healthcare Trust Lymphoedema Service, Teddington Memorial Hospital
11. Lewisham Hospital Lymphoedema Service
12. Meadow House Hospice, Ealing
13. Mt Vernon Micheal Sobell House
14. Princess Alice Hospice
15. Royal Marsden Hospital, Fulham Rd, Chelsea
16. Royal Marsden Hospital, Sutton
17. St Christopher's Hospice
18. St George's Hospital
19. St John's Hospice @ Charing Cross Hospital, Cancer Directorate
20. St John's Hospice @ St John's
21. University College London Lymphoedema Service
22. Whittington Health Lymphoedema Service in Haringey at Camden Partnership, Holloway Rd
23. Whittington Health Lymphoedema Service in Islington at River Place Essex Rd

18 service providers, 23 different services
Priority areas: BHR, SEL, NWL

Introducing Beth Dahill...

Transformation Lead – Planned Care NHS Barnet Clinical Commissioning Group (CCG)



Impact so far (1)

Service provision

- Business case now approved for Barnet
- Good progress Greenwich/Bexley.

National Guidance

- Influenced creation of national Guidance by National Lymphoedema Partnership (NLP)
- TCST attended parliamentary launch.

Commissioning Guidance for Lymphoedema Services for Adults in the United Kingdom



Commissioning Guidance for
Lymphoedema Services for Adults
in the United Kingdom

NLP NATIONAL
LYMPHOEDEMA
PARTNERSHIP

The National Lymphoedema Partnership

March 2019

i

Impact so far (2)

Awareness raising

- Supported Lymphoedema Awareness week events 2018 and 2019
- Journal publications, conference presentations, social media.



 **Lesley Smith** @LesleyLesleys · Mar 8
Great awareness event at Skipton House on #lymphoedema for #LAW18 @TCST_London @KarenPhysio . Learning about the positive impact of the TCST commissioning guidance healthylondon.org/resource/commissioning-guidance-for-lymphoedema/ and the work of @BritishLymph



Commissioning guidance for lymphoedema - Health...
Guidance for commissioners to improve the quality of life for people with lymphoedema in London. The guide identifies: the gaps in services how improvements can be
healthylondon.org

 **Margaret Sneddon** @MCSneddon1 Following

Simple Minimum Data Set on @BritishLymph website would resolve that thebls.com @TVSUK #legsmatter @MrsBosanquet @KarenPhysio

Alison Hopkins @AlisonHopkins01
Replying to @MCSneddon1 @BritishLymph and 2 others
One reason is because CCGs do not know their data on lymphoedema. In a well managed service over 80% with be lower limb #legsmatter @tvs @AccelerateCIC

11:44 PM - 21 Apr 2018

3 Retweets 3 Likes 

1 3 3

London Lymphoedema Community of Practice



Introducing Mary Woods...

Nurse Consultant Lymphoedema, Royal Marsden Hospital NHS Foundation Trust



Join us at the launch of the updated Guidance

Description



Transforming Cancer Services Team for London

Join the official launch of the revised and updated Commissioning Guidance for Lymphoedema Services for Adults Living with and beyond Cancer. This guidance has been developed by the Transforming Cancer Services Team (TCST) and the London Lymphoedema Community of Practice, funded by Macmillan Cancer Support.

At the event you will learn more about the how the guidance was produced and the recommendations for commissioning and improving lymphoedema services in London. You will hear from system leaders and service users on how this guidance supports the delivery of the Long Term Plan, and particularly how it supports the personalised care agenda.

This event is recommended for anyone with an interest in improving cancer and lymphoedema services, but particularly decision-makers, funders of services and service providers.

Confirmed speakers:

Gemma Levine, service user

Professor Peter Mortimer, Consultant in Dermatology and Lymphovascular Medicine, St Georges London

Beth Dahill, Transformation Lead – Planned Care, NHS Barnet Clinical Commissioning Group

Karen Friett, Chief Executive, Lymphoedema Support Network, Lymphoedema Community of Practice member

Emma Tingley, Strategic Partnerships Manager – London, Macmillan Cancer Support

Dr Karen Robb, Macmillan Rehabilitation Lead, Transforming Cancer Services Team for London

Members of the London Lymphoedema Community of Practice

Date And Time

Tue, 31 March 2020

09:30 – 13:00 BST

[Add to Calendar](#)

Location

Wellington House
133-155 Waterloo Road
London
SE1 8UG
[View Map](#)

[Book on Eventbrite](#)



**Healthy London
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Integrated Care System Guidance for Cancer Rehabilitation

Dr Karen Robb

Macmillan Rehabilitation Clinical Lead

Transforming Cancer Services Team, London

karen.robbs3@nhs.net @KarenPhysio

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In the beginning...

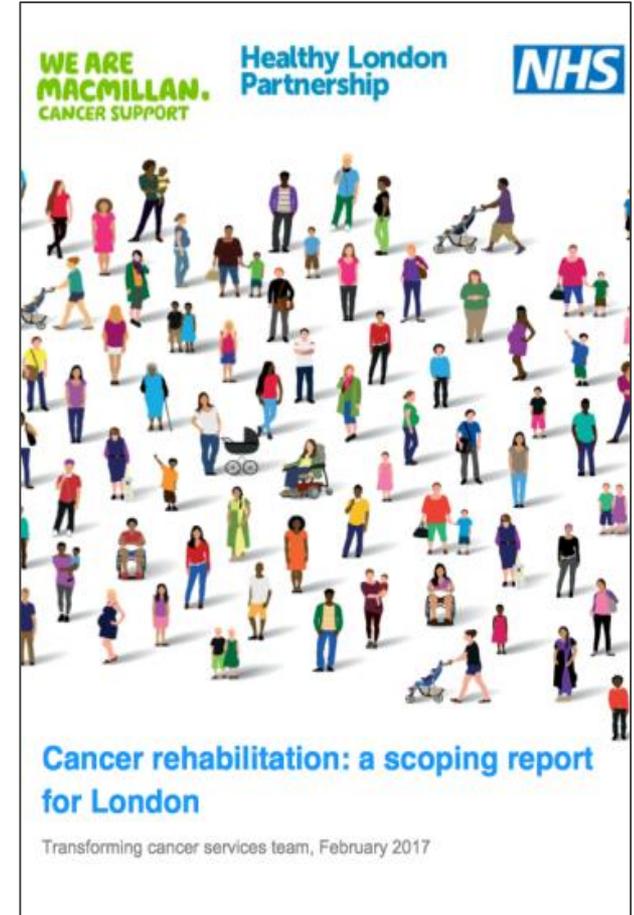
Impact on patients and carers: but Rehab helps!

Analysis of London eHNA data (2017): Top 10 concerns

1. Worry fear or anxiety
2. Tired, exhausted or fatigue
3. Pain or discomfort
4. Eating, appetite or taste
5. Sleep problems
6. Moving around (walking)
7. Work or education
8. Sadness or depression
9. Money or housing
10. Difficulty making plans

Patient and Public Involvement

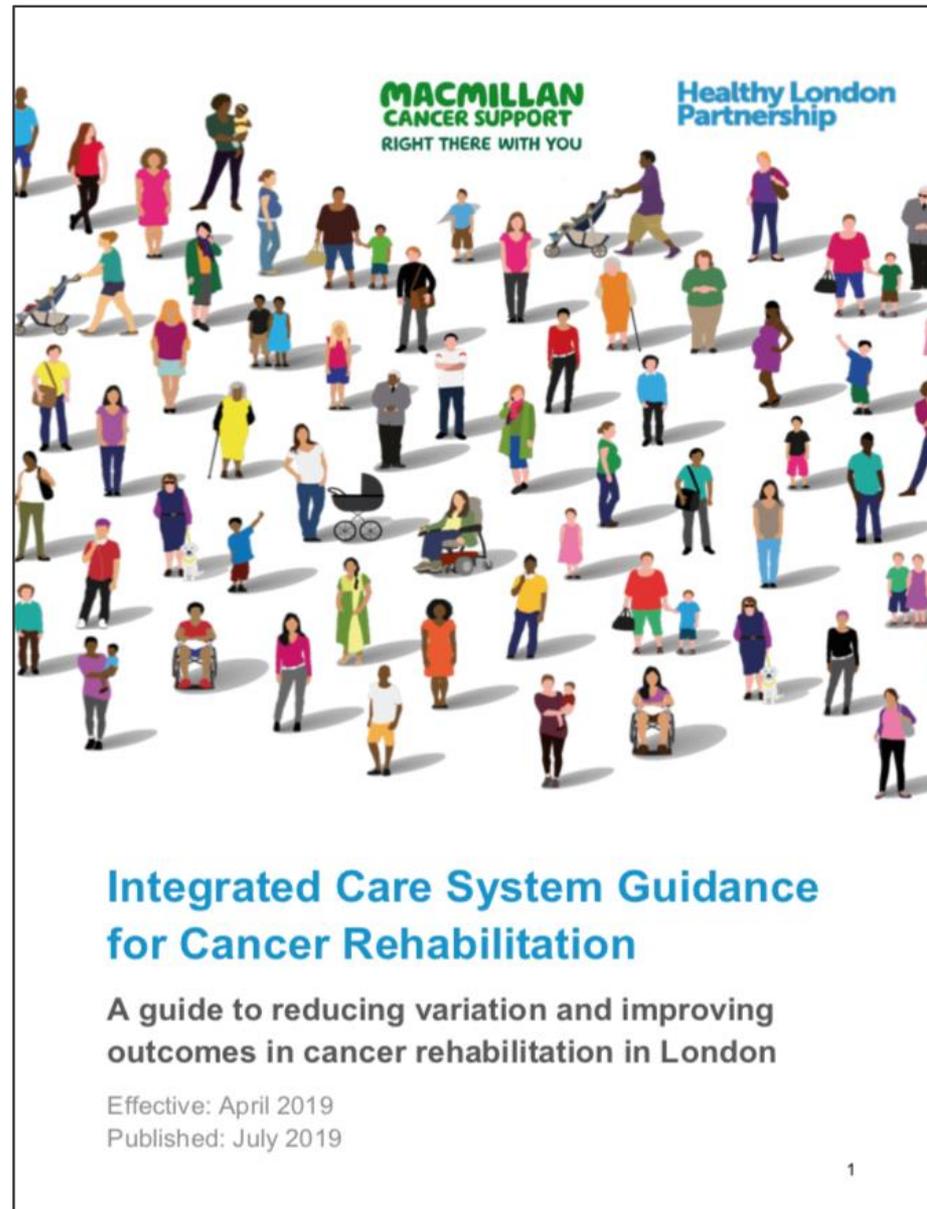
- Scoping work on cancer rehab included:
 - Task & Finish group
 - Engagement event
 - Focus groups with commissioners.
- The **key challenges** included:
 - Poor understanding of the economic benefits
 - The lack of quality data
 - Complexity of commissioning
 - Increasing demand & complexity
 - Education and training needs of wider workforce.
 - Poor awareness of the scope/breadth of cancer rehabilitation.



Introducing Stewart Block...

Service user, member of TCST Patient Advisory Group





Our guidance - Mapping of Services

healthy london.org

Mapping of pan London cancer rehabilitation services - Healthy London

About Our work Get healthy Resources Latest

Health London > Resources > Mapping of pan London cancer rehabilitation services

Mapping of pan London cancer rehabilitation services

Rehabilitation is a vital component in the care of people living with and beyond cancer and is key to delivering personalised care. Cancer rehabilitation provides a range of benefits for the wider healthcare economy but more needs to be done to raise the profile and awareness of cancer rehabilitation in London.

This service mapping report was produced by the Transforming Cancer Service's Team (TCST) and fully funded by Macmillan Cancer Support. It presents findings from a comprehensive mapping of cancer rehabilitation and physical activity services for people living with and beyond cancer in London and West Essex. Interactive maps are included for each STP area, including details on what each service provides and how to access services. TCST make recommendations for the ongoing provision and development of services in the London region.

The [interactive maps](#) outlined in the report can be explored in more detail below and downloaded from the menu to the right of this page.

Downloads

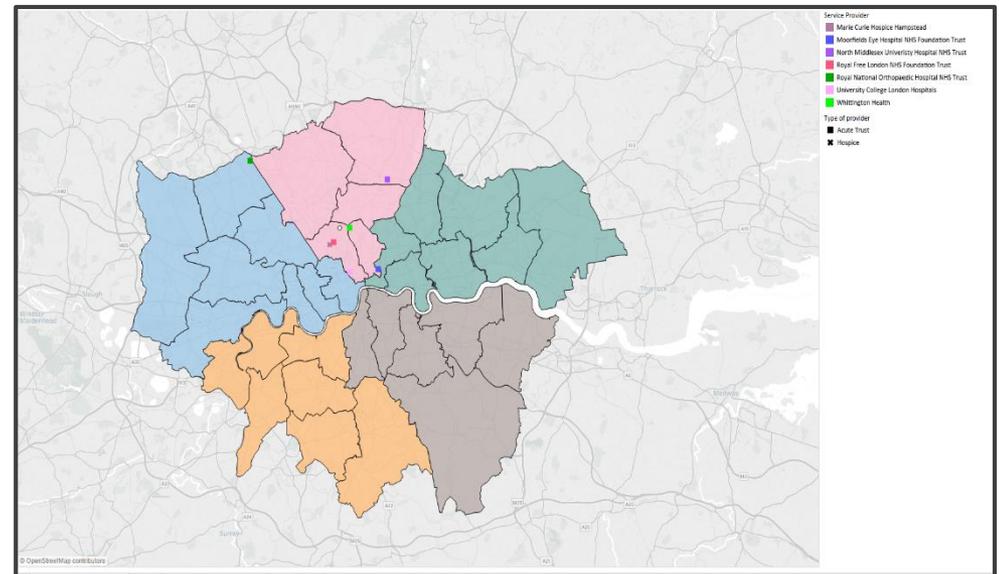
- [Mapping of pan London cancer rehabilitation services - final report \(.pdf\)](#)
- [All cancer rehab services map for London \(.pdf\)](#)
- [Cancer rehab services NWL map \(.pdf\)](#)
- [Cancer rehab services NCL map \(.pdf\)](#)
- [Cancer rehab services NEL map \(.pdf\)](#)
- [Cancer rehab services SEL map \(.pdf\)](#)
- [Cancer rehab services SWL map \(.pdf\)](#)
- [Cancer rehab services Essex map \(.pdf\)](#)
- [All cancer rehabilitation services data sheet \(.pdf\)](#)
- [All physical activity services data sheet \(.pdf\)](#)

London's Cancer Rehabilitation Services | London's Physical Activity Services

Notice something wrong?
If you have spotted anything in the report or on the various maps which is inaccurate or requires updating, please complete the TCST's template for updates and send to enq@land.tcstlondon@nhs.net

In: [Case studies](#), [Evaluation](#), [Reports](#)

Tagged: [cancer](#), [cancer rehabilitation](#), [cancer resources](#), [living with and beyond cancer](#)



<https://www.healthylondon.org/resource/mapping-of-pan-london-cancer-rehabilitation-services/>

Our resources – includes examples of best practice

Figure 3: South East London Head and Neck Cancer Rehabilitation Team case study

The South East London Head and Neck Cancer Rehabilitation Team:

A one of a kind service providing personalised rehabilitation from acute to community care

The South East London Head and Neck Cancer Rehabilitation team is the only comprehensive rehabilitation team of its kind in the UK, bringing specialist care closer to patients' homes. The team provides specialist intervention at every stage of the pathway, working across South East London to provide seamless care at Guy's Hospital, community clinics and at home.

The acute head and neck rehabilitation team provides multidisciplinary pre-treatment appointments for all patients, to assess their individual needs, set patient-led goals and prepare them for the effects of their treatment. All patients undergoing laryngectomy (removal of the voice box) are given the opportunity to meet a fellow patient to help prepare them and inform their consent. Dietitians provide carbohydrate loading advice pre-surgery to promote enhanced recovery.

All patients who need it are given a prophylactic swallow exercise programme to help maintain swallow function during treatment, as well as specialist physiotherapy to manage the effects of treatment, focusing on airway, trismus, shoulder dysfunction and fatigue. The team also provides a SALT led surgical voice restoration service for those undergoing laryngectomy.

'The team listens and helps me work out what's best for me ... you can say how you feel and they help'

Patient

The community team (CHANT) comprises Specialist Speech and Language Therapists, Dietitians, Physiotherapists, Clinical Nurse Specialists and assistants. The team provides multidisciplinary joint rehabilitation appointments following treatment. They provide support for patients with tracheostomies to manage tubes at home, reducing hospital admissions

The CHANT team works with specialist services in the region, including palliative care, lymphoedema, psycho-oncology, dentistry, surgery and oncology, to provide holistic personalised care for patients who have life-changing treatment for head and neck cancer. The team is commissioned by and covers 6 CCGs, representing economies of scale in the provision of specialist cancer rehabilitation.

The team also works closely with the acute team to enable patients to move seamlessly between services, by information sharing, having regular meetings, as well as rotation and secondment opportunities in each part of the team to ensure all team members have a good understanding of the entire patient pathway

'The aftercare I have received has been second to none – everything has been explained fully to me and I have improved immensely over the period since treatment. Thanks to your care I'm well on the road to recovery'

Patient

'The team focus on my experience and my concerns'

Patient

Our resources - Quality improvement tools

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Cancer Rehabilitation Service Improvement Tool: Service Provider version

December 2018

This tool was developed by the Transforming Cancer Services Team for London. The work was fully funded by Macmillan Cancer Support.

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Cancer Rehabilitation Service Improvement Tool: Service User version

December 2018

This tool was developed by the Transforming Cancer Services Team for London. The work was fully funded by Macmillan Cancer Support.

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Partnership



Transforming Cancer Services Team

Cancer Rehabilitation Data Recommendation
Report

October 2017

WE ARE
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Introducing Kate Ashforth...

Joint Head of Speech and Language Therapy, The Royal Marsden NHS Foundation Trust.



Impact - Recommendations for London

Ambitions

1. CCGs and STPs to work collaboratively with key partners to ensure provision of comprehensive cancer rehabilitation at the appropriate level for all cancer patients, across all tumour groups and at every stage of the pathway, including prehabilitation and palliative rehabilitation.
2. Service providers to embed the service improvement tools into clinical practice and have a forum to discuss improvement opportunities identified through the process.
3. Explore how the tools could be used to allow benchmarking between services.
4. Commissioners and Cancer Alliances to work in partnership with local cancer rehabilitation services to collect quality baseline data, in line with the TCST data recommendation report.

Summary of progress

Influencing STP plans to embed recommendations:

- KR presented to key STP/Alliance meetings to influence action plans
- Variable progress: NEL and NWL outstanding.

Influencing better data capture:

- Additional questions on cancer rehabilitation in Macmillan eHNA

Supporting the workforce:

- Named 'Rehabilitation Champions' in STPs
- Working with HEE and Alliances to support education and training initiatives.
- Raising profile of our competition winners.

Introducing Steve Tolan...

Allied Health Professions Lead, NHS England & NHS Improvement, London Region



02

What is the future state?

Liz Price

Associate Director, Personalised Care for Cancer (TCST)

Neesa Mangalaparathy

Project Manager, Living With and Beyond Cancer (NHS England & Improvement Cancer Programme)

London's STP priorities

Highlights from STPs' draft long term plans

STP / Alliance	Primary care nursing and Cancer	Psychosocial support and cancer	Cancer Rehabilitation	Lymphoedema
North Central London				
North East London				
South East London				
RM Partners	SWL only	SWL only		

Personalised Care in Cancer, and Quality of Life

12th February, 2020

Neesa Mangalaparathy

Project Manager for LWBC, NHS Cancer Programme

neesa.mangalaparathy@nhs.net

@nee5a

- 55,000 more people each year will survive five years or more following diagnosis.
- Three in four cancers will be diagnosed at an early stage.

Personalised Care is a LTP priority **NHS**



Deliver most comprehensive screening programme in the world



Ensure equitable and fast access to diagnostic tests and results



Provide faster, safer and more precise treatments

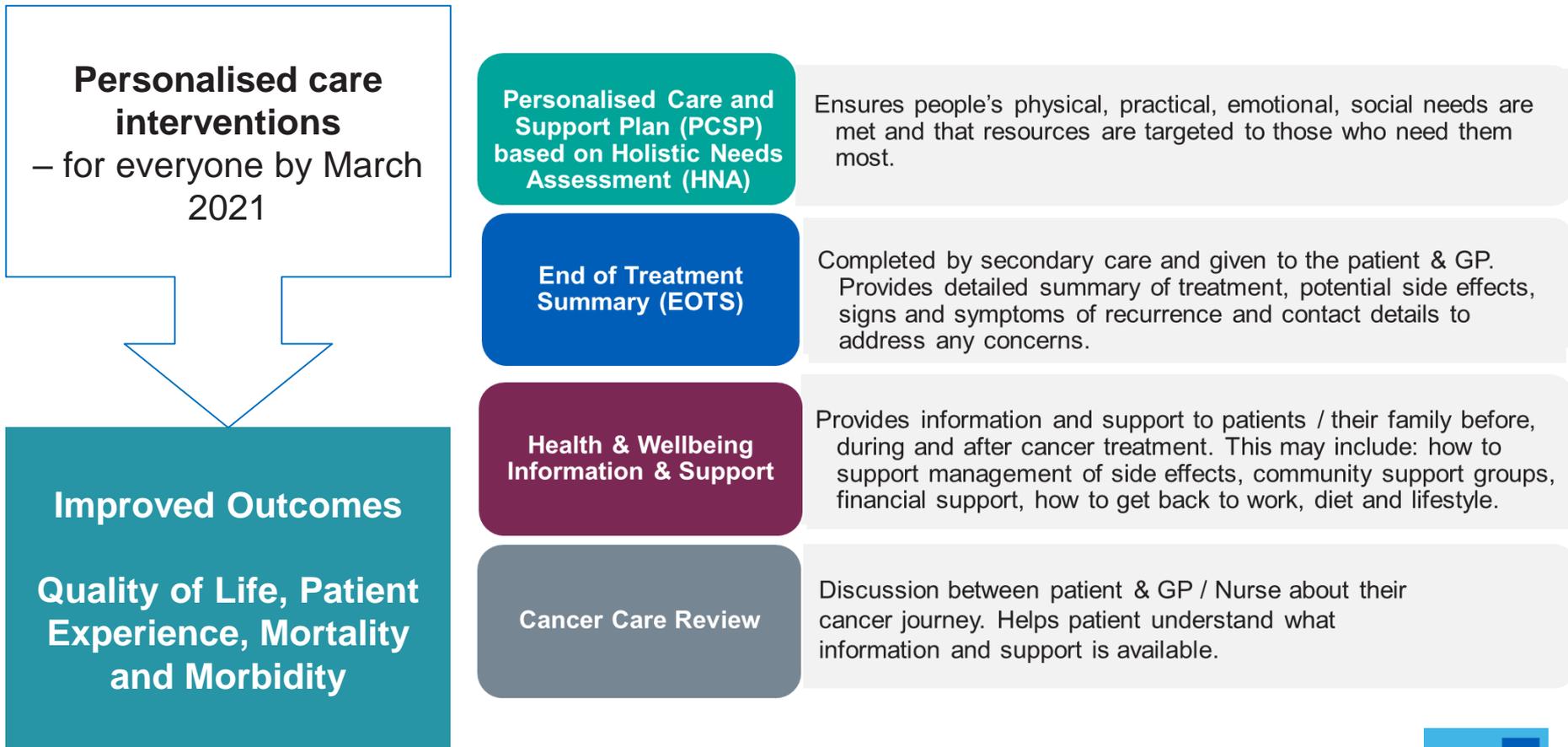


Offer personalised care for all patients and transform follow-up care



Harness the collaboration of academia, the NHS and industry

The LTP ambition: Personalised Care interventions



The LTP ambition: Personalised Stratified Follow Up

Personalised stratified follow up

- Breast by March 2020
- Prostate and Colorectal by March 2021
- Other cancers TBC by March 2024

Improved Outcomes

Quality of Life, Patient Experience, Mortality and Morbidity

From diagnosis and repeated at relevant time points:

- Personalised Care and Support Planning based on Holistic Needs Assessments (HNA)
- Ongoing support and information for Health and Wellbeing



In general, everyone, including those in scheduled follow up, should have:

- Personalised Care and Support Planning based on HNAs
- Information on signs/symptoms of recurrence
- Health and Wellbeing Information and Support
- Support for self-management
- End of Treatment Summary
- Surveillance scans/tests
- Rapid access to clinic
- Telephone support
- Signposting or referral to services e.g. consequences of treatments
- Monitoring for side effects
- Cancer Care Review

The LTP ambition: Quality of Life

‘From 2019, we will begin to introduce an innovative quality of life metric...to track and respond to the long-term impact of cancer.’



- NHS England is leading the way in cancer care by recognising that QoL outcomes are as important to patients as survival.
- Monitoring QoL outcomes will help us understand the impact of cancer and its treatment.
- NHS England is working in joint partnership with Public Health England to produce the new metric. This aims to measure quality of life after a diagnosis of cancer at a scale and depth that is not being matched anywhere else in the world.

The QoL metric

Importance of quality of life outcomes

Guide the national cancer programme – priority setting, managing the impact of cancer

Prompt improvement discussions at a Cancer Alliance, commissioner and provider level

Empower patients

Piloting data collection

The QoL pilot project aimed to evaluate data collection methods and gather data to develop summary QoL metric(s).

Alliance	Trusts
Northern	Northumbria Healthcare NHS Foundation Trust
	Newcastle upon Tyne Hospitals NHS Foundation Trust
East of England	East Suffolk and North Essex NHS Foundation Trust (Ipswich and Colchester Hospitals)
North Central and East London	University College London Hospitals NHS Foundation Trust
	Bart's Health NHS Trust
	Royal Free London NHS Foundation Trust
Wessex	University Hospital Southampton NHS Foundation Trust
	Hampshire Hospitals Foundation Trust



Patient summary reports

Questionnaire results

This report shows your results to the Quality of Life questionnaire you recently completed.

- The scores on the questionnaire are out of 100. The higher the scores the better quality of life at the moment. Lower scores may indicate that you have some health issues.

- Green** means that **three**  **out of four people**
75%

typically have results like this. This is a good result and suggests that you do not have any problems in this area.

- Orange** means that **one**  **out of four people**
25%

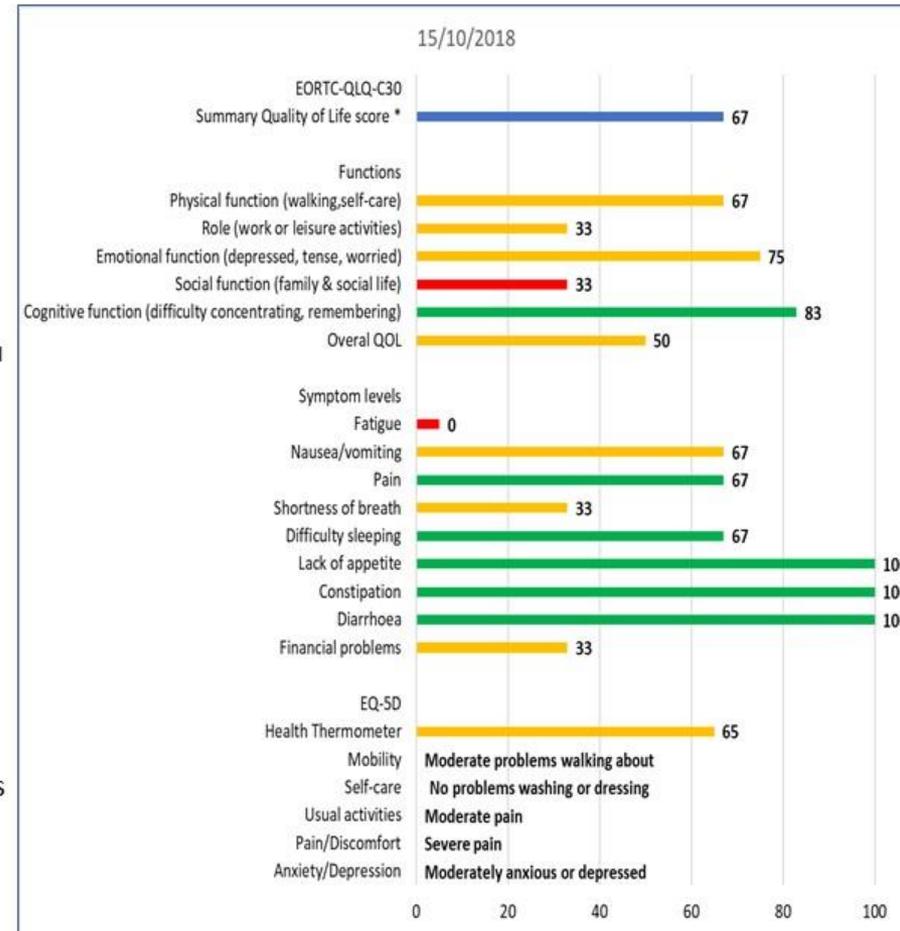
typically have results similar to yours. This may indicate that you have some concerns in this area.

- Red** means that **one**  **out of ten people**
10%

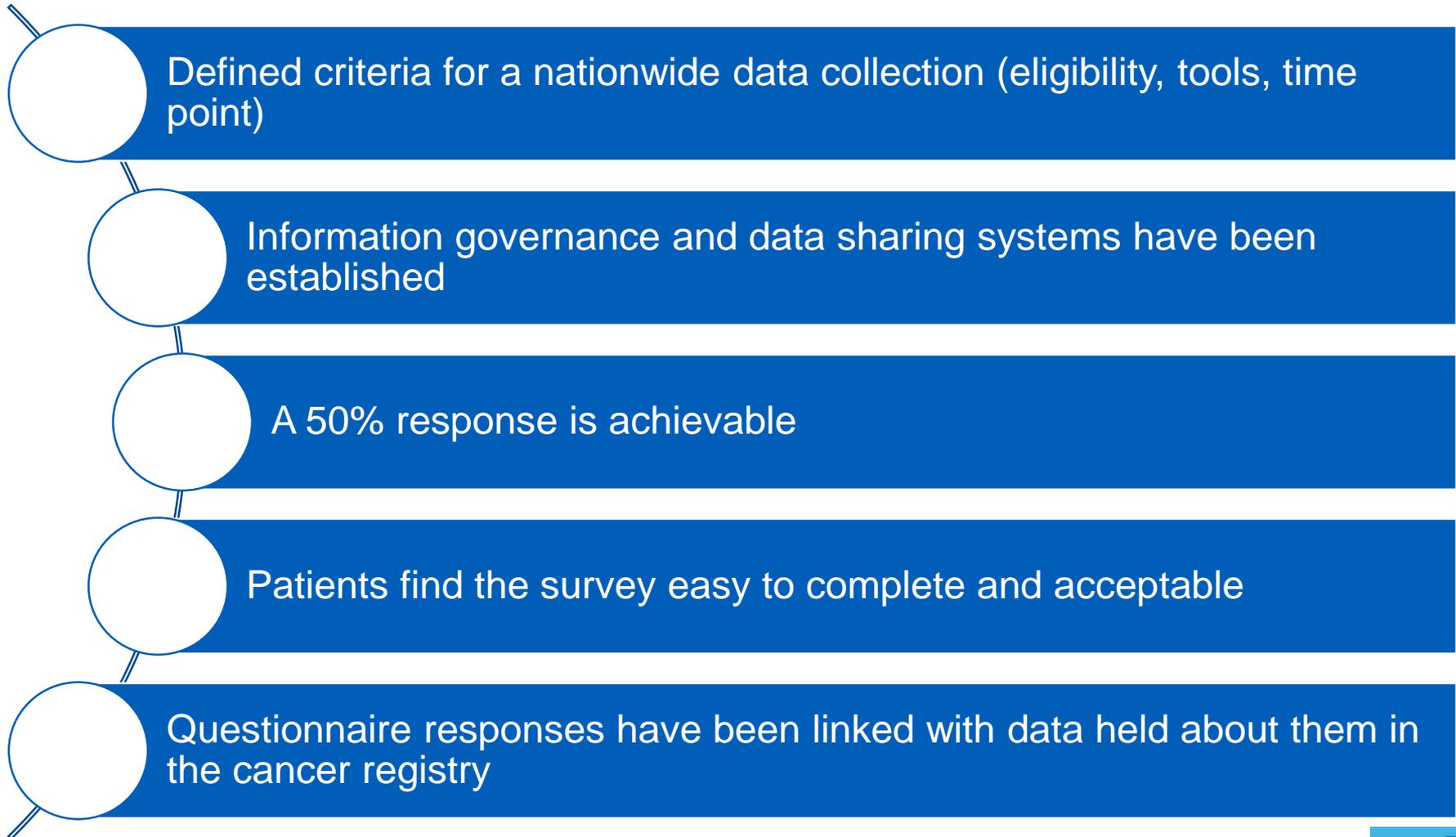
typically have results similar to yours. This may indicate an issue which is bothering you.

- Blue** means that we do not have enough information about how other people feel to make a comparison with your results.

If you are concerned about any health issues please contact your GP or clinical team



Progress so far



QoL Metric project update

Phase three: Pilot data collection



April 2017 – June 2019

- 7 Trusts in 5 Cancer Alliances collect data
- EQ-5D and EORTC
- Over 1000 breast, prostate and colorectal cancer patients
- Outline options for further phase four
- Consult on implementation plan.

Phase four: Test new criteria



April 2019 – March 2020

- Establish method for 'scale up'
- Test additional tumour types
- Determine central vs local systems
- Improve automation
- Feedback outcomes to pilot sites; review service improvement options

Phase five: Launch QoL metric

April 2020 – March 2021

- Launch June 2020
- Breast, prostate, colorectal initially
- Metric report March 2021
- Promote equality of access
- Test in 'rarer' cancers
- Translate all materials
- Test patient-level feedback.

Next steps



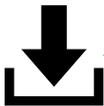
Close phase 4, start phase 5



Share updates and results with our key stakeholders and partners



Set processes in place to launch national data collection in June 2020, in breast, colorectal, prostate cancers initially



Seek further input from other cancer groups to allow rapid inclusion of these following initial rollout



Inclusion of all cancers in the QoL metric by 2022

03

The patient's voice:

Bonnie Green

Daphne Earl (co-facilitator)

David Jillings

Sarifa Patel

Stewart Block



Comfort break (20 mins)



04

Reflection and action planning

Table exercise (1130-1230)

On your STP tables:

1. Identify and agree on current state, gaps and opportunities in your STP:
 - Primary care nursing & cancer
 - Psychosocial support & cancer
 - Cancer rehabilitation
 - Lymphoedema
2. Identify key stakeholders to support progress and reduce inequalities
3. Discuss 3 key actions per project



Peer feedback (1230-1300)

Review two other STPs' reflections and actions.

Please provide your feedback re:

- Strengths and opportunities?
- Gaps and concerns?
- Examples of good practice to share with the STP?
- Any top tips to share?



Facilitators will capture your helpful feedback to include in revised STP Packs!

Discussion (1300-1320)



Closing remarks





Contact us



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TCST is part of the Healthy London Partnership. HLP is a collaboration of London's NHS, London Councils, Public Health England, the Mayor of London, plus other organisations and individuals striving to make London the world's healthiest global city.

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