



LIVING WITH AND BEYOND CANCER: HOW WE ARE TRANSFORMING CANCER CARE SERVICES ACROSS LONDON

Price L; Hyman P; Robb KA; Wiley G; Yaganti S

Introduction

The Transforming Cancer Services Team (TCST) supports the delivery of NHS England's Five Year Forward View and National Cancer Strategy across London. Working with commissioners, providers, alliances, charity partners and other stakeholders to support delivery of cancer waiting targets, earlier diagnosis of cancer, those who are living with and beyond cancer (LWBC) and to increase the pace of improvement. We provide strategic leadership for cancer across London as well as supporting our stakeholders.

From 2015, TCST developed a pan London programme for people living with and beyond cancer because:

- There are 210,000 people LWBC in London (TCST/PHE, 2017);
- 70% people affected by cancer have at least one other long term condition (Macmillan);
- 56% people are living longer than 5 years (TCST/PHE 2017);
- Improved survival results in a greater demand for services, particularly regarding psychosocial support and rehabilitation;
- Fifteen months after a cancer diagnosis, cancer patients are 60% more likely to attend A&E, 97% more likely have an emergency admissions and have 50% more contact with their GP (Nuffield Trust, 2014);
- Physical activity benefits 40% in comparison to chemo, with benefits also on physical, psychosocial and prevention (Macmillan, *Move More*);
- Patient experience of cancer aftercare and support is particularly poor (NCPES 2016, Macmillan 2017).

London has an overall population of 8 million people, with a commuter population of around 3 million. There are 32 boroughs in London. The NHS is working towards integration with social care and this is taking place across five footprints. These are known as Sustainability and transformation partnerships (STPs). There are a further three cancer alliances in London that provide support with system change in cancer.

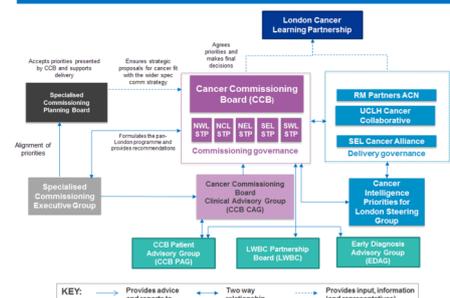
Methodology

TCST's LWBC team support system change and promote the delivery of exceptional cancer care across London through co-design; leading and influencing with innovation; developing comprehensive guidance documents with implementation plans; developing resources to secure funding and support implementation including education resources; and utilising cancer analytics innovatively.

Our team of five (whole time equivalent 4.2) includes clinicians and managers. Led by an Associate Director, we have an experienced cancer project manager, a consultant physiotherapist, a consultant psychologist and a clinical nurse specialist. The first two posts are funded by London's NHS commissioners on permanent contracts. The latter three posts are funded by a national cancer charity, Macmillan Cancer Support, on fixed term contracts. The team is further supported by specialists in public health, patient experience, analytics/intelligence and administration.

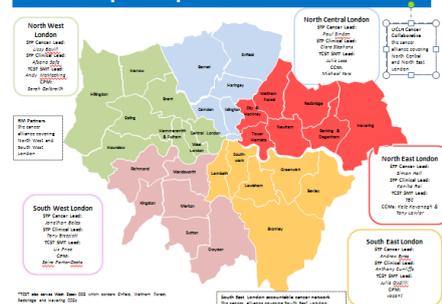
The work programme is overseen by a pan London Living With and Beyond Cancer Partnership Board. This is a multi-organisation and multi-disciplinary board with several patient representatives. There are subgroups covering five main workstreams. The Partnership Board reports into the pan London Cancer Commissioning Board.

Cancer commissioning governance model



KEY: — Provides advice and reports to — Two way relationship — Provides input, information (and representatives)

London map and representation



Results

To support improvement to quality of life for people affected by cancer, the LWBC team's work programme includes:

- **Cancer as a long term condition** — designed a structured approach in primary care: 4 Point cancer care review model and a primary care pathway for men with stable prostate cancer), developing nursing leadership for the primary care nursing workforce.
- **Psychosocial support** — designed a pathway for people affected by cancer to access integrated, psychosocial support from the time of diagnosis through to post treatment, long term condition management and end of life. This project includes commissioning guidance, mapping of services, sample business case for system changes, service specification for psycho-oncology.
- **Physical consequences of treatment** — lymphoedema (commissioning guidance, mapping of specialist services, service specification and business case), cancer rehabilitation including physical activity (commissioning guidance, mapping of specialist services, service improvement tool and minimum dataset).
- **Cancer analytics** — developed national cancer prevalence dataset, analysis on Charlson score on multi-morbidity at time of diagnosis, national level analysis on prevalence data compared to general practice cancer registers, analysis on subsequent cancers (new primary cancers and recurrences).
- **Primary care education** — developed train the trainer resource pack, education portal for primary care professionals and funders, training needs analysis surveys for general practitioners and primary care nurses. This workstream is delivered jointly with the TCST's Early Diagnosis team.

Conclusions

London has a complex health and care system. A planned, strategic approach is required to improve the quality of life for people living with and beyond cancer.

Guidance and resources are needed to support stakeholders to improve quality of life.

A strategic approach with governance is also needed to coordinate and maintain visibility of 'living with and beyond cancer' agenda for a prevalent population of 210,000, 70% of which live with at least one other long term condition.