



Improving Outcomes and Access - Specialised Cancer Pathways South Cheshire and Vale Royal

A joint review between NHS South Cheshire CCG,
NHS Vale Royal CCG and NHS England

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1. Introduction

The purpose of this report is to engage with the Overview and Scrutiny Committee on the review of cancer pathways to achieve best outcomes and experience for cancer patients in South Cheshire and Vale Royal. This review is a joint programme of work between NHS England (which commissions specialised services) and NHS South Cheshire and NHS Vale Royal Clinical Commissioning Groups (which commission services for their local populations).

The review is focussed on specialised cancer services. These are services that are provided in relatively few hospitals, to catchment populations of more than one million people. The number of patients accessing these services is small and a critical mass of patients is needed in each centre to achieve the best outcomes, maintain the clinical competence of NHS staff and make best use of resources such as specialist expertise and equipment.

While some services such as specialist surgery are undertaken in centres, we also want to ensure that patients can access as much care as possible in their local area to avoid the need to travel. Therefore our approach involves commissioning services that are 'centralised where necessary, local where possible' with excellent links between teams that provide local and specialised care to ensure best outcomes and experience for patients.

This review will not impact on local cancer care which will remain unchanged. Patients with suspected cancer will continue to be referred to Mid Cheshire Hospitals NHS Foundation Trust (Leighton Hospital) by their GP for further investigation, diagnosis and local treatment.

Not all cancer pathways will be reviewed. This will be limited to a small number of specialised cancer services that do not meet national standards or where access could be improved such as delivering chemotherapy or outpatient services closer to home.

A South Cheshire and Vale Royal Cancer Commissioning Board has been established comprising Clinical Commissioning Groups, NHS England, GP Cancer Leads, Healthwatch and Public Health representatives to oversee this programme of work. Expert clinical advice is also provided from national groups such as the National Clinical Intelligence Network.

2. Why a review is needed

2.1 Commissioning for improved outcomes and reducing health inequalities

A health needs assessment of the South Cheshire and Vale Royal population shows that cancer is a significant growing long term condition and is a major cause of death, with noted health inequalities. The high incidence and mortality (death) rates of cancer is due to a range of factors including increased life expectancy and lifestyle factors. Key points are summarised below:

- An ageing population aligned with increases in cancer incidence
- Around 42% of people across South Cheshire and Vale Royal are at risk of developing cancer during their lifetime. This risk is forecast to increase to 44% over the next ten years
- Cancer is the main cause of premature death (under 75) across South Cheshire and Vale Royal
- There are variations in health outcomes from cancer across towns - Crewe has particularly high health needs
- NHS Vale Royal CCG had the worst 1 year survival from cancer in England in 2012 (63.7% compared to 69.3% for England).

2.2 The principles we are working to

To meet these challenges we need to make sure that the services we commission deliver best outcomes and experience for patients and we are therefore applying the following principles to this review:

- Services will be delivered as close to home as possible and centralised where necessary to achieve best outcomes
- Services will be fully compliant with NHS England policy and standards
- Services will be delivered that maximise ease of access for patients
- Screening and symptomatic services will be seamless and delivered in line with national standards
- Providers should demonstrate their contribution to research and innovative practice
- Patients will have access to a specialist workforce that provides continuity and sustainability of specialist care in line with national standards
- Patient pathways will be integrated with good governance and communication with primary care, social care and other providers involved in patient care
- Sufficient capacity will be provided to ensure patient access to services including achievement of cancer waiting time standards
- Patients will be engaged throughout the process and their views considered
- Provider sustainability will be considered as part of the review

3. Current pathways of care

Patients who are diagnosed with cancer at Leighton Hospital and require specialised treatment may be referred to specialist hospital providers in different geographic locations, based on agreed guidelines and protocols between local and specialised teams. For example, there is a long-established partnership between Mid Cheshire Hospitals NHS Foundation Trust (MCHFT) and the University Hospitals of North Midlands NHS Trust (UHNM) which already collaborate in the provision of a significant number of services, including upper gastrointestinal and haematological cancers.

There are also established pathways with hospitals in Greater Manchester such as The Christie NHS Foundation Trust which provides radiotherapy, chemotherapy and some specialised surgical services to the population of South Cheshire and Vale Royal (eg gynaecological cancer).

2.1 The review of the specialised gynaecological cancer pathway

In order to achieve these aims, NHS England, NHS South Cheshire CCG and NHS Vale Royal CCG are undertaking an assessment of the gynaecology cancer pathway. Currently patients who require specialised treatment are referred to The Christie for their

surgery, chemotherapy and radiotherapy. In response to the potential for further collaboration between MCHFT and UHNM, we are assessing which provider is able to provide best outcomes and/or better access to services for women who are diagnosed locally.

This involves an assessment of key outcomes such as survival, mortality rates, clinical trials and waiting times. We are also assessing other factors such as each provider's approach to integration, support for patients at all stages of the pathway and capacity to deliver efficient and sustainable services.

The number of patients within South Cheshire and Vale Royal who receive specialised gynaecological cancer care and whose pathway may change is very small. In 2014/15, 23 patients were referred for specialised surgery and 48 patients were referred for chemotherapy or radiotherapy.

A multi-disciplinary panel with expert clinical input and Healthwatch support will meet in September in order to assess each submission.

4. Engagement so far

We are working closely with the local provider, Mid Cheshire Hospitals NHS Foundation Trust and with patients to inform this review. A patient focus group has been held with women currently on the gynaecological cancer pathway to gain an insight into their experience of care. In addition, engagement events have been held with members of the public. These have provided valuable feedback regarding travel, access and support to carers along the pathway of care and have informed the criteria commissioners have used to measure services.

We will continue to engage with key stakeholders through:

- Further engagement events in collaboration with Healthwatch colleagues
- Regular briefings to patients and the public
- Close communication with GPs and other key stakeholders
- Patient surveys

5. What happens next?

We will continue to inform and engage key stakeholders throughout this process, including patients, Overview and Scrutiny Committees and providers.

The South Cheshire Cancer Commissioning Board meets in September 2015 to agree which other pathways will be reviewed and we anticipate that this work will be completed by March 2016.