

**NHS Herts Valleys Clinical Commissioning Group**  
**Board Meeting**  
**29 January 2015**

<b>Title</b>	Update on Cancer Pathway Implementing recommendations	<b>Agenda Item: 12</b>
<b>Purpose (tick one only)</b>	Approval <input type="checkbox"/> Discussion <input type="checkbox"/> Consideration <input type="checkbox"/> Noting <input checked="" type="checkbox"/>	Information <input type="checkbox"/>
<b>Responsible Director(s) and Job Title</b>	Louise Gaffney, Interim Director of Strategy Nicola Bell, Accountable Officer	
<b>Author and Job Title</b>	Avni Shah, AD Planned and Primary Care Phil Sawyer, Herts Valleys Clinical Lead for Cancer	
<b>Recommendations/ Action Required by the Board</b>	<p>To NOTE the content of and the progress made against the 25 recommendations from the Independent Review of the two week wait cancer pathway at West Hertfordshire Hospitals NHS Trust (WHHT).</p> <p>The report outlines the work undertaken to date against each recommendation across the whole system. Work is continuously evolving and a further update will be presented to the Board in May.</p>	
<b>Classification</b> <i>Is this report exempt from public disclosure? (ie. FOIA or DPA)</i>	No	
<b>Impact on Patients/Carers/Public</b>	The progress outlined, on improving the two week wait cancer pathway is of interest and directly impacts patients, carers, the public and professionals alike.	
<b>Engagement with Stakeholders/Patient/Public</b>	The plan includes actions taken on developing patient and public engagement, specifically related to cancer. There will be ongoing input to inform further implementation.	
<b>Links to Strategic Objectives</b>	<p><b>Objective 1:</b> To deliver clinically sustainable and affordable services that meet the changing needs of the population, address inequalities and deliver our guiding principles as outlined in the Strategy: ‘Deliver and Healthy Herts Valleys’</p> <p><b>Objective 2:</b> To improve the quality of services and deliver better patient outcomes and experience</p> <p><b>Objective 3:</b> To work with our partners to transform health and social care through the effective use of joint funding</p> <p><b>Objective 4:</b> To improve engagement with member practices, patients, the public and carers, and to ensure this is embedded within the CCG governance structure</p>	
<b>Board Assurance Framework</b> <i>Does this report provide evidence of assurance for the</i>	Yes - this report provides evidence of positive assurance for: <ul style="list-style-type: none"> <li>• Quality and patient safety indicators and sustained performance</li> <li>• Effective performance against outcomes and access targets</li> </ul>	

<i>Board Assurance Framework?</i>	
<b>Does this report mitigate risk that is included in the Corporate Risk Register?</b>	Yes, the actions within the attached plan mitigate some risks identified in the Corporate Risk Register.
<b>Resource Implications</b>	The resource implications are largely related to the support of enhanced education about the management of follow-up cases in primary care. This is likely to be covered under 'Primary Care Plus'.
<b>Equality and Diversity</b> (Has an Equality Analysis been completed?)	The work being done to improve the 2 week wait cancer pathway fits with the CCG objectives to address health inequalities within our local population. There is no requirement at this stage for a formal Equality Quality Impact Assessment
<b>Legal/Regulatory Implications</b>	N/A
<b>Sustainability Implications</b>	There are implications about sustainability included in the action plan itself
<b>NHS Constitution</b>	<p><b>Principle 1:</b> The NHS provides a comprehensive service available to all</p> <p><b>Principle 2:</b> Access to NHS services is based on clinical need, not an individual's ability to pay</p> <p><b>Principle 3:</b> The NHS aspires to the highest standards of excellence and professionalism</p> <p><b>Principle 4:</b> The NHS aspires to put patients at the heart of everything it does</p> <p><b>Principle 5:</b> The NHS works across organisational boundaries and in partnership with other organisations in the interest of patients, local communities and the wider population</p> <p><b>Principle 6:</b> The NHS is committed to providing best value for taxpayers' money and the most effective, fair and sustainable use of finite resources</p> <p><b>Principle 7:</b> The NHS is accountable to the public, communities and patients that it serves</p>
<b>Report History</b>	CCG Board presentation on the Independent Review – July 2014 Update in Accountable Officer's Report to Board - November 2014 Paper to CCG Commissioning Executive – mid November 2014
<b>Appendices</b>	Appendix 1 – Progress on Cancer Action Plan against the 25 recommendations

## **1. Executive Summary**

An external Independent Review was commissioned by the NHS Trust Development Authority (the TDA) following West Hertfordshire Hospitals NHS Trust's (WHHT) own immediate incident management and internal investigation. WHHT were concerned that patients who did not attend their first appointment during the initial two week period, were not always contacted or offered another appointment. The Independent Review took place between January and March 2014. The external panel focussed both on the Trust's internal systems and arrangements and also looked at the wider local health system, including primary care, commissioners and the local cancer network.

Findings of the Independent Review together with the recommendations were presented to the Herts Valleys Board in July 2014 and a plan was developed to address the 25 recommendations. Good progress has been made against the recommendations and progress is reported to the CCG Local Cancer Action Group at a bimonthly meeting. This paper provides an update to Herts Valleys Board on progress made to date, by West Hertfordshire Hospitals NHS Trust against each recommendation.

## **2. Background**

As noted, the external Independent Review followed on from findings internally within WHHT of potential failings in their own systems and processes. There was immediate internal action taken to review and remedy these potential shortcomings and significant steps taken to review the impact on patients and the scale of the issue. The external panel focussed their work on the Trust's internal systems, organisational and governance arrangements and also on the wider local health system, including primary care, commissioners and the local cancer network.

In summary the review found:

- Flaws in the booking processes, exacerbated by demand and capacity issues and problems with managing cancer services across complex Trust sites;
- Inconsistencies in reviewing patient notes, cancer referrals and clinic outcomes;
- Lack of clear management arrangements; and
- Lack of training on and knowledge of the guidance for handling cancer two week wait referrals together with limited safety net systems in primary care and commissioning.

The Independent Review made a number of recommendations to the Trust, the local Clinical Commissioning Group - Herts Valleys CCG - and also to national bodies to ensure that systems are improved for the benefit of patients. Recommendations were presented to the Herts Valleys Board in July 2014. These included actions to:

- create a new cancer plan for the Trust that articulates a vision for cancer care as a whole, including each care pathway;
- improve IT and communications infrastructure to support high quality care;
- strengthen relationships and improve links between key clinical staff and colleagues in the outpatients department;
- improve two week wait cancer appointments to better suit patients' needs in order to encourage better attendance;
- establish a forum to strengthen public understanding on the importance of two week wait appointments and encourage attendance; and
- improve processes and provide training on booking appointments.

### **3. Progress to date – Key headlines**

The Trust has already put a significant number of measures in place to help prevent the issues occurring again, and address the recommendations. These include:

- An overarching cancer improvement plan;
- Making changes to the governance arrangements within the Trust that raise the profile of cancer within the Trust and embed cancer services under the Medicine Directorate of Outpatient Services.
- Consideration of various options on a new IT system to track each patient's appointment, missed appointments and cancellations. And, in the interim, putting in simple measures to ensure patient treatment lists are reviewed daily to enable tracking of patients' appointments. This also supports the work on measuring demand versus capacity;
- Regular reviews of the overall management of all referrals and appointments;
- Daily reviews of all patients who miss a booked cancer appointment;
- Arrangements for retraining and better supervision of staff; and
- Detailed work on specific cancer pathways to ensure streamline pathways for diagnostics prior to the two week wait appointment.

Across the health system, we at Herts Valleys set up a Local Cancer Action Group with the Trust as a member to provide key updates on progress made to date. The Group also has a work plan to develop local pathways for three high volume cancer types, including Head and Neck, Colorectal and Lung. This CCG- wide group is working alongside the Beds and Herts Cancer network on this.

The team at Herts Valleys is working with NHS England and Macmillan to organise a participation event for those people living locally - and their carers -who have been affected by cancer in the last three years. The review recommended that we establish a forum to strengthen public understanding on the importance of two week wait appointments and to encourage attendance. The participation event on 26 February 2015 will be the first stage of developing an on-going forum and we will be asking patients, carers and families to share their experiences from a first appointment with a GP through to diagnosis, treatment or discharge.

In addition, there is a west Hertfordshire resident sitting on an existing Bedfordshire and Hertfordshire-wide Cancer Forum which has representation on the East of England Patient. This helps ensure there is a link with the various aspects of work for transformation of services, eg prostate cancer etc.

The latest update with detailed actions for colleagues in WHHT, working with us here at Herts Valleys, are included in Appendix 1. These actions are current as at mid- late January and have been given a rating in terms of their completion status as red, amber or green with additional comments about progress or issues.

### **4. Conclusion and Recommendations**

In summary, good progress has been made against each recommendation, but it is acknowledged there is still a lot to do, especially in terms of ensuring there is a robust IT platform to support new processes and management arrangements. The need for swift implementation of systems has been reinforced to WHHT, who have provided assurance of their focus on these issues.

The Board are asked to NOTE the progress made to date. We will provide a further update on progress to the Board in July 2015.