

Healthwatch IOW Cancer Services for IOW residents: co-ordination, travel and urgent assistance report (2018)

Response to Healthwatch recommendations

Organisation: Isle of Wight CCG
Date Submitted: 5/9/18

Healthwatch Recommendation	Actions	By when
<p>1.This report to be shared with all managers and clinicians involved with cancer services for Isle of Wight residents. All staff to be mindful of connections between services as well as their own specific contribution. Impact of increased awareness to be monitored through feedback from patients and patient groups.</p>	<p>A copy of the Healthwatch report, and this action plan will be presented to IOW CCG Clinical Senate, and Governing Body.</p> <p>The Commissioner will ensure that these recommendations are considered at a variety of forums to inform any service changes in the future:</p> <ul style="list-style-type: none"> • Cancer Forum(hosted by Isle of Wight Healthcare NHS Trust) • Patient Travel Improvement task and finish group, in particular with reference to recommendation 4 and 5 • Local Authority Commissioning Team • Primary Care ‘All Island’ Locality meetings and CCG Primary Care Round – up Newsletter <p>The CCG has facilitated direct links between Specialised Commissioning at NHS England South (commissioners for rare cancers, radiotherapy and chemotherapy) and Healthwatch IOW. The CCG understand that in addition to IOW NHS Trust, this report has also been sent to Portsmouth Hospitals Trust and University Hospital</p>	<p>Clinical Senate 13/9/18 Governing Body (partnership) 26/9/18</p> <p>July 2018</p>

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	Southampton Foundation Trust for comment.	
<p>2. Improvements in co-ordination between cancer services in different NHS Trusts should be implemented without delay. Establishing good practice in cancer services to be used a model for other specialties which become more integrated in future.</p>	<p>Cancer care is increasingly provided by networks of hospitals comprising tertiary centers alongside general hospitals. For this reason the NHS established Cancer Alliances across England as part of the implementation of “Achieving World Class Cancer Outcomes: A strategy for England 2015 – 2020”.</p> <p>IOW CCG recognises the need to support continual improvements in the coordination of cancer care, and works towards this through participation in the Wessex Cancer Alliance.</p> <p>The Wessex Cancer Alliance has created a number working groups looking at specific cancers as well as therapies such as chemotherapy and radiotherapy. These groups are chaired by clinicians from providers of cancer services with the aim of supporting clinicians and organisations to improve pathways and patient care.</p> <p>Separately, IOW CCG, working jointly with IOW Trust and Portsmouth and Southampton Cancer Centre has been holding a range of tumour specific clinical teleconferences to consider cancer pathways where process issues which causes delays can be eliminated. An example of this is with regard to the recent local development of lung cancer referral forms between hospitals, where previously the transfer of care was delayed due to wait for medical letters.</p> <p>In addition, the three main providers (i.e. Cancer Unit at IOW NHS Trust, and the two tertiary Cancer Centres of PHT and UHSFT) of</p>	<p>Ongoing</p> <p>July 2018</p>

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	<p>cancer care for Island residents have established the Solent Alliance Cancer Board. This forum provides the ideal platform for clinical review of pathways led by the 3 providers.</p>	
<p>3. Barriers to communication between specialist cancer services, general practice and community support services should be identified at an early date with the help of patients and patient groups. Improvements should then be implemented without delay.</p>	<p>IOW CCG works closely with providers of cancer services and their patient groups to identify areas of improvement to all aspects of cancer services including communication issues.</p> <p>The CCG is currently involved in three initiatives aimed at reducing communication barriers including:</p> <ol style="list-style-type: none"> 1) Supporting the implementation of the Recovery Package. <p>The Recovery Package is a series of interventions which improve outcomes for people living with and beyond cancer and is made up of:</p> <ul style="list-style-type: none"> • A Holistic Needs Assessment and care plan • A Treatment summary (completed at the end of the acute treatment phase and sent to patient and GP) • Health and Wellbeing Events (all patients at end of their treatment are invited to 6 sessions which offer education and support to prepare the patient for living with or beyond cancer). <ol style="list-style-type: none"> 2) Working with the Hampshire and Isle of Wight Sustainability and Transformation Partnership to establish a single, joined up personal health record that will accessible by all clinical teams involved in the care of the patient. 	<p>ongoing</p>

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	<p>3) The implementation of the Care and Health Information exchange across Hampshire and the Isle of Wight is improving the ability of clinicians to access information across Portsmouth Southampton and Isle of Wight hospitals and into GP surgeries.</p>	
<p>4. A Charter should be developed without delay setting out the standards expected of NHS providers with regard to travel needs of patients. To include treatment and appointment schedules, admissions and discharge, and processes for service change. This to be a model for other specialties with regard to cross-Solent travel.</p>	<p>The CCG has worked with Southampton and Portsmouth Hospitals over many years to ensure that as far as possible appointments are made so that Island patients are able to travel off peak, particularly for outpatient appointments, which make up the bulk of the travel required. The CCG will continue to work with our mainland hospitals to reinforce this message.</p> <p>Outside of cancer services, people are now able to book their own first outpatient appointment through the e-referral service, which means they can choose the most convenient available time. This service should be made available to people at the point of referral and is available online at https://www.nhs.uk/using-the-nhs/nhs-services/hospitals/nhs-e-referral-service/</p> <p>Some patients using Southampton Hospital can already manage their own appointments digitally through a service called “My Health Record”. The CCG’s ambition is that this capability is made available across Portsmouth and the Isle of Wight hospitals in the near future.</p>	<p>ongoing</p>

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	<p>These initiatives, when combined will empower patients to take control of their own mainland appointments, enabling them to factor any availability or travel issues into their choice of appointment.</p> <p>CCG has previously agreed to consider the development of a <i>charter</i> following completing of the Acute Services Redesign process, which will not be complete until the end of 2018.</p>	
<p>5. Local agencies should no longer take decisions in isolation about financial assistance to people travelling for cancer treatment. Before any proposed change, partners including the local NHS, local authority and voluntary and community sector should jointly explore all options to maintain and improve travel support.</p>	<p>In recognition of this issue, the Local Authority has established a Patient Travel Improvement Group. This group has multi-agency representation from the CCG, Local Authority, IOW NHS Trust, patient representatives and voluntary groups, plus the three Solent travel operators. This new forum provides an opportunity to consider all options and to explore solutions for travel support and information.</p> <p>The IOW CCG has recently developed a new web page, putting together all information and relevant links regarding travel support into a single portal. The CCG will continue to improve and promote this information resource over the coming months.</p> <p>The CCG is currently developing a publicity campaign to raise awareness of travel options and where to get good information.</p>	<p>July 2018</p> <p>July 2018</p> <p>October 2018</p>
<p>6. Ways need to be found for cancer patients to by-pass the accident and emergency department when admissions to St Marys Hospital</p>	<p>The Isle of Wight Trust is a Cancer Unit and does not have an Oncology Ward, unlike the mainland larger hospitals who are registered as Cancer Centres.</p>	<p>Direct admission – not taking forward, unless national clinical guidelines change.</p>

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<p>occur, and to ensure ward moves and discharge take place at appropriate times, with a suitable level of planning and support.</p>	<p>The current pathway whereby patients access the wards via Emergency Department is the correct nationally recommended clinical pathway endorsed by NICE and the Acute Oncology Guidance. However, the IOW CCG expects providers to review and update service delivery on a regular basis and if NICE or Clinical bodies recommend such a change, the CCG would ensure that it was implemented.</p> <p>The CCG works in partnership with the IOW Trust to ensure the use of national best practice in its discharge process and in particular avoid late night discharges.</p> <p>Discharge begins at admission, planning is taken forward through a multidisciplinary team in partnership with the patients their family and carers.</p> <p>http://www.nhs.uk/NHSEngland/keogh-review/Documents/quick-guides/Quick-Guide-Improving-hospital-discharge-into-the-care-sector.pdf</p>	