

University Hospital Southampton Foundation Trust (UHSFT) Response to the Healthwatch Isle of Wight Report of July 2018.

Report Title

Healthwatch Isle of Wight- Cancer Services for Isle of Wight Residents:
Co-ordination, Travel and Urgent Assistance.

Background to the Report

In 2016-17 cancer services were identified by Healthwatch Isle of Wight as a topic for special attention. Mid 2017 people were invited to take part in a survey if they had used cancer services since January 2016. There was a focus on three parts of people's experience. Accordingly, there were questions on the level of co-ordination between services, on arrangements for cross – Solent travel, and on assistance when help was needed urgently with unexpected symptoms.

Background to the non surgical oncology Services provided by UHSFT to St Marys IOW Trust.

The tumour sites that are covered by the UHSFT on island comprise of :

Breast – post op oncology services only, colorectal –oncology only, lung, gynae and upper gastrointestinal cancers

Outpatient Clinics

UHSFT provide outpatient oncology clinics at St Marys, these clinics are provided by a combination of oncology consultants and advanced nurse practitioners. These clinics take place every day apart from Fridays. The patients are a combination of new patients referred from the multidisciplinary meetings, patients on continuing treatments (either chemotherapy or radiotherapy) and some follow up patients.

Multidisciplinary Team Meetings (MDT)

UHS consultants attend the on island tumour site specific MDT meetings; this is where the vast majority of referrals to the oncology new patient clinics are received from. In the main patients will already have been on a cancer pathway and received surgery before they are referred for chemotherapy or radiotherapy. Patients are also referred back into the MDT as necessary for further discussion during their treatment cycles. Patient can also be discussed at the UHSFT mainland MDT as necessary.

Ward Referrals and Acute Oncology Service (AOS)

The inpatient and emergency care, for acute oncology patients, on island is provided by St Mary's medical team. Emergency access is via the Emergency Department and the patients requiring admission are cared for on the medical wards. UHS oncology consultants will attend and provide a specialist opinion for inpatients as requested from the medical teams.

St Marys employ an AOS nurse who will collate the information re the acute oncology patients who have been admitted within 24 hours who need an oncology consultant review. The AOS nurse will also review patients and discuss with the oncologist.

AOS Emergency Telephone Line

UHSFT provide a 24/7 emergency line for all patients receiving treatment under the care of an UHSFT oncologist. This line is available for patients, GP's and all St Mary's health professionals' to use. The discussions are recorded on the electronic patient record and an e mail is sent to the IOW team every time an IOW call is received and dealt with.

Chemotherapy Treatments

The systemic anti cancer treatments for the most common tumour sites are delivered via the on island chemotherapy unit. This service is provided by St Mary Trust. Patients are referred to UHSFT for some trial chemotherapy.

Radiotherapy Treatments

The patients being treated by a UHSFT oncologist will receive their radiotherapy on the mainland at UHSFT

Response to Recommendations

1. This report has been shared with the UHSFT Lead Clinician for Cancer as well as the Lead for Cancer Care, the IOW lead oncologist, the Chemotherapy Consultant Nurse, the Divisional Management Team, the Cancer Centre Manager and the Lead Cancer Nurse; the Radiotherapy Services Manager.

Monitoring of patient feedback will take place in the form of the National Cancer Experience Survey, the local Friends and Family Test; annual patient surveys are undertaken in Radiotherapy

2. Improvements in co ordination have and need to be made , these will be as follows:

One of the UHSFT MDT co-ordinators is based at St Marys IOW Hospital every Friday; they are able to deal with any queries about pathways.

The UHSFT Clinical Nurse Specialist (CNS) team will continue to liaise with the St Marys IOW CNS Team about individual patients.

There is currently "read only "access from both Trusts to the local Cancer Informatics server and database.(Somerset) This gives both trusts access to each other's information about patients on the cancer 2 week wait, 31 day and 62 day pathways. A future improvement that IOW need to implement is to reconfigure the database access so that there will be an electronic link to the UHS database. This has already been achieved for the patients coming from the Dorset region since Sept ' 17. The link would allow patient information to be readily accessible and for the pathway to be updated in real time.

Since the last report there have been improvements in the cover and input into the oncology clinics on island. This has allowed for improved continuity of care and co ordination of treatments as there is now a nurse practitioner in clinic and increased consultant cover.

3. Barriers to communication will be removed in some cases and improved in others. UHSFT is committed to improving IT systems and connectivity. As of Sept 2018 Cancer Care will become “paper light” and an Electronic Document Management system will be place. All historic notes will be scanned into the system and will be accessible for each clinician in an oncology clinic on island. Future documents created will also be scanned in and electronically available.

Locally all of the IOW GP surgeries now have an electronic link to a UHSFT system that allows for all outpatient letters and electronic inpatient discharge summaries, for patients discharged from UHS to be accessed. Currently 33% of surgeries are connected, the link is available to the others and this is being promoted via the South Central Commissioning Unit to all GP’s.

There is access across both trusts to the electronic chemotherapy prescribing system, which contains all the prescribing information and notes made in the electronic journal in the system.

There is a national roll out of all GP referrals now having to be made electronically via e referral, this is to be in place from 1st October 2018.

Information for patients at Isle of Wight NHS Trust and 16 GP surgeries on the island has gone live, in May 2018, on one of the longest-established regional shared care records systems.

The Care and Health Information Exchange (CHIE), which was formerly known as the Hampshire Health Record, was established in 2003. Earlier this month, 140,000 residents on the Isle of Wight had their own shared records created.

Staff at the Isle of Wight NHS Trust and 16 local GP surgeries are now able to access the shared record from within their own patient management systems.

Using single sign-on, trust staff can look up local GP records at the touch of a button, plus any healthcare information about a patient that has been generated off the island at mainland trusts.

For patients this means they do not have to repeat their care story to each care provider and their GP has access to their integrated care record which also shows blood tests already carried out at hospital – reducing the need for patients to repeat tests.

Future plans to develop the shared record by adding more features. This includes giving patient’s access to the record and support for patient held apps.

4. UHSFT would support and inform any future Charter that was written, setting out standards expected with regard to travel needs of patients.

Currently patients who need daily travel for weeks at a time have access to the Wessex Cancer charitably funded “Daisy Bus”. This provides a pick up and returns service to the Red Funnel ferry terminals. The Radiotherapy booking staffs have a list of patients who are using the bus and book patient’s

radiotherapy appointments around the timings of the bus and the return ferries.

Chemotherapy team at UHS also take into consideration if a patient is coming via patient transport and book appointments accordingly. Most IOW patients receive their chemotherapy on island at the St Marys unit.

Patients who need to access the hotel accommodation at Jurys Inn do so , this is arranged post a discussion with their on island CNS or consultant. The hotel accommodation and food is funded by the IOW local commissioners. The decision as to who can stay is based on patient clinical and social needs. There is also access to accommodation for relative/carer to stay as well.

5. Financial assistance is available for patients and relatives experiencing financial hardship due to any travel costs associated with being to access their cancer treatments. These are either via the benefits system or from charitable organisations. For example Macmillan cancer charity provides grants for those in need and there is also access to a Macmillan Citizens Advice service for those who need help navigating the benefits system.

The patients/ relatives can access any of these directly or via their IOW CNS or clinician.

6. UHSFT would support working with St Marys about any future models of care that St Marys proposes for emergency acute oncology patients presenting on island. Currently UHS support is via the acute oncology ward reviews and the provision of the emergency 24/7 telephone line available to IOW patients and health professionals.