

IMPROVING CARE FOR OUR CANCER PATIENTS

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TAKING  IN OUR CARE

Barking, Havering and Redbridge
University Hospitals 
NHS Trust

INTRODUCTION

- One of the busiest oncology departments in the country
- We are constantly focused on:
 - looking for new ways to improve our patients' care and experiences
 - improving efficiencies across the service
 - a holistic approach to caring for patients both during and after their treatment
- We must ensure we can meet the increasing demand now and into the future
- We believe we can best achieve this by:
 - creating a centre of excellence for cancer treatment at Queen's Hospital
 - creating a 'Living with and beyond cancer' hub



WE'VE GOT A LOT TO BE PROUD OF...

- Met the national 62 day cancer standard for 13 months in a row
 - Only trust in London to have achieved this
- Member of the UCLH Cancer Collaborative
- Part of the BHR Cancer Collaborative Committee
- Enhanced Supportive Care team shortlisted for national Nursing Times award
- EMPOWER programme shortlisted for Nursing Times and Health Service Journal awards

FOR HEALTHCARE LEADERS
HSJ AWARDS
FINALIST

**Nursing
Times
Awards**



STATE OF THE ART RADIO THERAPY...

- State of the art radiotherapy centre at Queen's Hospital
- Three brand new machines – Halcyon (x2) and the Edge (x1)
- First in world to have two Halcyon machines on one site
 - halves treatment times; more accurate; more comfortable
- The Edge – can treat much more complex cases



CONTEXT

- Need to change how we deliver healthcare nationally
 - best use of resources (people, estate and finance)
 - deliver services in a way that meets changing demands of our population
- We serve more than 1million people from our three boroughs and across the whole of Essex (referred through our regional Neurosciences Centre)
- We expect a 6% increase year on year in patients requiring chemotherapy due to:
 - Population increase
 - Improvements in early diagnosis
 - State of the art treatments means people live longer
- Increases the need for services to be able to meet demand
- Increase in complexity in cases

Year	Chemotherapy patients treated
2015/16	1,695
2016/17	1,809
2017/18	1,905

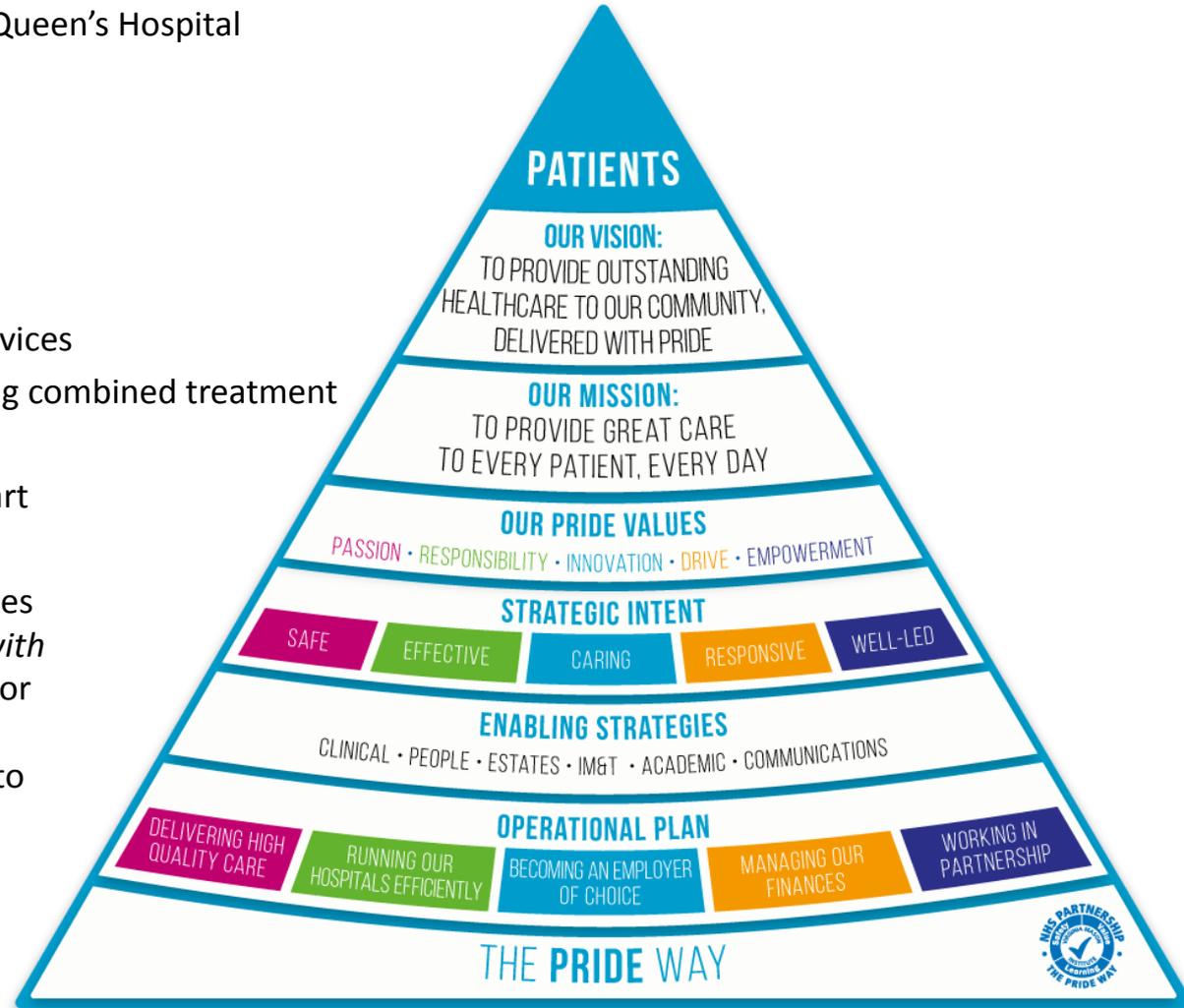
OVERVIEW OF OUR SERVICES

- Provide treatment and health and wellbeing services across both King George and Queen's hospitals
- Essex Neurosciences Centre
- Cancer centre
 - Radiotherapy (Queen's)
 - Chemotherapy
 - 30 bed inpatient ward (Queen's)
 - Outpatient facilities
- Clinical trials unit (Queen's)



OUR PROPOSAL TO IMPROVE CHEMOTHERAPY SERVICES

- Centralise chemotherapy services at Queen's Hospital
- Brings this on-site with:
 - specialised medical cover
 - inpatient services
 - outpatients services
 - state of the art radiotherapy services
 - easier for patients requiring combined treatment
 - cancer clinical trials
 - improved ability to take part
- Review of health and wellbeing services
 - exploring Cedar Centre as a *Living with and beyond cancer* hub as beneficial for patients to receive their health and wellbeing care at a different location to their treatment



CURRENT TREATMENT PATHWAY

- All patients' pre-assessment at Queen's Hospital
- Treatment location decided by type of chemotherapy needed to give safest care
- Complex cases treated at Queen's – access to inpatient facilities and medical cancer specialists eg for drugs with high risk of anaphylactic shock; chemotherapy given together with radiotherapy
- Nursing staff rotate across both hospitals
- We treat on average 600 patients a month in Sunflower Suite at Queen's and average 150 per month in Cedar Centre at King George
 - Two years ago we saw on average 450 and 200 patients per month respectively
- Sunflower Suite – six day a week service
- Cedar Centre – consolidated treatments from four to two days a week due to lack of demand and increase in complex cases



CLINICAL CASE FOR CHANGE

Quality and safety

- King George Hospital – no medical cover in Cedar Centre
- Queen's Hospital– hub of medical expertise with facilities on one site
- Centralising nursing staff provides better training and mentoring; opportunity to 'grow our own' – staff prefer this approach

Efficiency and productivity

- Our pharmacy teams make all cancer treatments at Queen's – then transport
 - This can cause delays at Queen's – reflected in patient feedback
 - Unable to fulfil additional prescriptions at King George
- New proposals mean Pharmacy can dispense drugs earlier – can start giving treatments earlier

Future vision

- Centralising chemotherapy fits into our longer term ambitions to improve patient care
- Currently oncology patients who come in as emergencies go through our Emergency Department
- Longer term vision – telephone triage service as first port of call; ability to bring patients straight to acute oncology service to be cared for by our cancer team



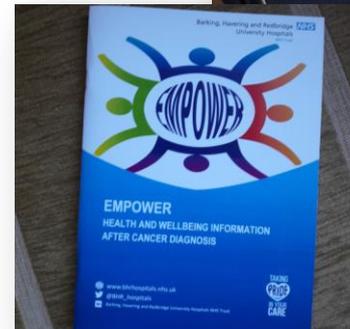
PATIENT EXPERIENCE CASE FOR CHANGE

Patient feedback

- Negative feedback around waiting times and delays
- Reflected in Barking & Dagenham Healthwatch's Enter and View visit in September 2017 and in our Friends and Family Test

Living with and beyond cancer

- Currently offer a range of health and wellbeing services across both sites
- Want to improve portfolio of services for patients living with and beyond cancer
- Fulfil National Cancer Strategy - provide required holistic care to our patients
- Moving chemotherapy to Queen's frees up Cedar Centre
- Exploring the possibility of using this space as a Living with and beyond cancer hub



PATIENT NUMBERS

- 22% patients currently affected by the proposed change
- Expected to decrease over time due to increase in complex cases

CCG	QH	KGH	Total
Barking & Dagenham	433	149	582
Basildon & Brentwood	138	23	161
Havering	972	163	1135
Redbridge	314	167	481
W. Essex	45	22	67
Others	83	25	108
Total	1,985	549	2,534

Postcode	QH	KGH
IG1	128	72
IG4	26	4
IG5	44	30
Total	198	106

IMPACT

Travel

- Some impact on patients as reflected in numbers
- However reduced clinical risk, safer service, and improved care and experience
- Follows national practice for better outcomes eg stroke
- Consultants will continue to assess the need for patient transport
- Transport will continue to be provided wherever necessary, as is current practice

Parking

- Dedicated oncology car park next to Sunflower
- Free parking during treatment; £2 at other times
- Capacity not anticipated to be an issue



TIMELINES

- Implement improvements to delivery of chemotherapy services by end of October
- Allows us to be ready ahead of the increased demand of winter pressures
- Ongoing improvement of health and wellbeing services



COMMUNICATIONS AND ENGAGEMENT

- Involve and engage our patients, public, partners and stakeholders throughout implementation and delivery
 - Messaging through range of channels eg website, plasma screens, stakeholder and GP newsletters
 - Comprehensive leaflet outlining plans available digitally (printable) and in hard copy across both our hospitals
- Work closely with partners eg local authorities and Healthwatch organisations to help inform and engage
- Dedicated patient partner to ensure information is relevant and easy to understand
- Feedback developed into FAQs and housed on our website
 - Dedicated email address for comments and queries
- Continue to listen to patient feedback and liaise with Cancer Patient and Public Advisory Group (CPPAG) post-implementation

healthwatch



WHAT DO OUR PATIENTS THINK?

- Shared our proposals with our Patient Partnership Council (PPC) and CPPAG
 - All PPC members thought this would be a good idea to have the chemotherapy services on one site
 - It was queried if there would be sufficient capacity at Queen's – it was noted capacity will be available as treatments would be better spaced throughout the day and with potential treatments being delivered as part of a Saturday/Sunday for chemotherapy only
 - It was noted that PPC members were all in agreement with the proposed changes to our chemotherapy services

