

Integrated Cancer System, “London Cancer”, Briefing paper – August 2011

The aim of this briefing paper is to update stakeholders within North Central & North East London and West Essex on our work to develop an integrated cancer system, *London Cancer*, across our two cancer networks. This work is being undertaken in response to the specification issued in May 2011 by NHS London’s Cancer Implementation Board.

The Context for Change

There are some simple but unacceptable facts that must drive change in cancer care in London, many of which were outlined in the Case for Change (Commissioning Support for London, 2009): cancer survival in the UK falls behind many in Europe; 1,000 lives could be saved in London if UK cancer survival rates equalled Europe’s best, and later diagnosis is a major contributory factor in poorer survival. Whilst London has some areas of excellence and research is often world-class, in reality, patient access, experience and outcome are often poor. The rate of improvement in cancer mortality has been slow in North Central and North East London compared to elsewhere in London and the rest of England; indeed, in some tumour types, survival has actually worsened in recent years.

London Cancer

Through a series of meeting and workshops led by UCLPartners and their Cancer Provider Network team, it was agreed to develop an Integrated Cancer System for North Central and North East London and West Essex. This will be known as *London Cancer* and will serve a population of approximately 3,500,000. *London Cancer* will be underpinned by patient-empowerment, research, evidence and information sharing and will radically refocus hospitals into working in partnership with each other, primary care and patients, to deliver coordinated, comprehensive pathways of excellent care for every patient irrespective of where they access our system or the type of cancer they have.

We have already started work to better understand how care is delivered along whole pathways across our system and to identify the priority areas for improvement. We aim to operate as *London Cancer* from 1st April 2012, adopting a new way of working with each other as providers, as well as our patients and commissioners, to make a step change for the better in cancer care in our area.

London Cancer’s Objectives

By 2015, we aim to deliver for cancer patients treated by *London Cancer* providers:

Improved survival - 200 more lives saved per year compared to 2011/12

Improved experience of care - >90% positive answers to 10 key questions in the national cancer patient experience survey

The organisations forming *London Cancer* have agreed that our system priorities are to ensure that in everything we do we are:

- Patient-focused - improving what matters to patients, in partnership with them; through listening, communication, involvement, information, education, choice, and personalisation. Patient need and the patient journey will be the organising framework for care
- Optimising care along a co-ordinated pathway - collective responsibility for outcomes and experience; through earlier diagnosis, excellent treatment for all, local treatment where appropriate, compassionate aftercare and empowering/supporting patient self-management.

- Embedding research - allowing patients to benefit from innovation more quickly, and ensuring the right research is done; for personalised care, equitable access to trials, the discovery of new treatments and evaluating new ways of working together with patients
- Increasing value - through superior outcomes for patients per pound invested; continual improvement over time against our previous performance

Key Developments in North Central & North East London and West Essex since the June 2011 briefing include:

- UCLPartners, as hosts of the intended integrated cancer systems *London Cancer*, submitted three documents to the evaluation panel at London Health Programmes on behalf of the NHS London Cancer Implementation Board on 30th June 2011 and has since been undergoing a robust assurance process to ensure it is equipped to take on the challenge of working differently from April 2012:
 - 9th August saw over 50 colleagues from the *London Cancer* area attend an Evaluation Panel Assessment day where our plans were scrutinised by experts from across the country.
 - To support our submission, on 17th August 2011, UCLPartners also submitted additional information showing how *London Cancer* will respond to the service recommendations made within the Model of Care for Cancer in London.
 - UCLPartners expects to receive in early September details of the next stage of planning and prioritisation required by London Health Programmes, with a final recommendation on designation of *London Cancer* as an integrated cancer system expected on 13th September 2011.
- One very important aspect of the *London Cancer* system development is to compile a baseline assessment of our current pathway for each tumour type. This will increase our understanding how to progress our fundamental objectives to improve the cancer patient experience and improving survival from cancer.

At the Integrated Cancer System Leads meeting on 23rd August, a methodology for data baseline capture and validation was agreed that will be facilitated by UCLPartners. This should allow each tumour type to develop a key dataset for understanding where they can make improvements to the pathway for the most improvement in patient outcomes and experience, as well as identifying gaps in our knowledge and what information we will need to make the right decisions on service improvements in the future.
- Across London, a Radiotherapy work stream had been set up by London Health Programmes to look at current provision, capacity and commissioning arrangements for radiotherapy and to identify opportunities for improving efficiencies within the system. The group has now reported to the Cancer Implementation Board and *London Cancer* providers have contributed data and expertise to the work. We expect feedback from the Board to include their plans for further work on Radiotherapy commissioning.
- The National Cancer Research Network and UCL Partners Cancer Provider Network are currently seeking to appoint a new Clinical Lead for Research. This is a part-time position, requiring the commitment of 1PA per week (funded) and it is expected that applicants will be working at a consultant level within the North Central London & West Essex Network and have a robust track record in NIHR clinical trial activity. Candidates wishing to apply should email directly to Prof Kathy Pritchard-Jones, UCLP Medical Director for Cancer

(k.pritchard-jones@ich.ucl.ac.uk) in the form of a letter of interest and CV. Closing date: 19th September 2011. Interviews are anticipated to be in the last week of September and will be by panel including representation from the NCRN Coordinating Centre.

- We will be working very soon on developing the brand and image of *London Cancer* and would like the input of our providers to begin this. We have had a number of suggestions for an organisational strapline, so please use our Doodle to give us your feedback on which we might choose. We will be accepting feedback until 30th September 2011: <http://www.surveymonkey.com/s/GJGQGSP>.