Improving Quality: Infrastructure: Implementing Transforming Care After Treatment (TCAT) programme for cancer

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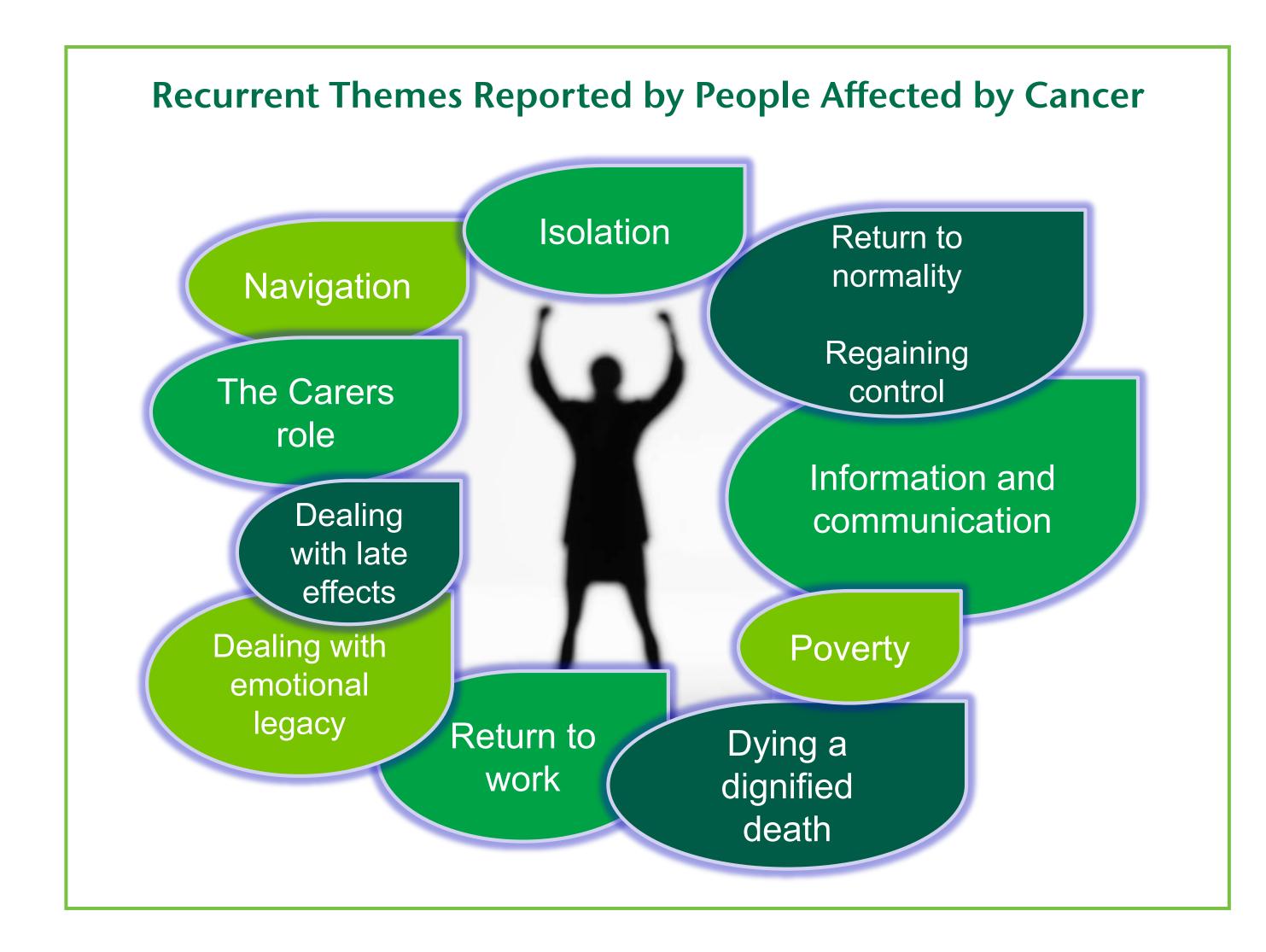


Background / Aim

The number of people living in Scotland for up to five years after a cancer diagnosis has reached a record high (1). As a result of earlier detection and better treatments, many more people are living with cancer. TCAT's aim is to ensure that people living in Scotland with a cancer diagnosis are prepared for and supported to live with the consequences of the diagnosis and its treatment.

TCAT is a major component of the Scottish Cancer Taskforce workplan, which will be delivered in partnership with the people affected by cancer, Scottish Government, regional cancer networks, NHS Boards, local authorities and the voluntary sector. This partnership approach will facilitate the development and implementation of future models of care that:

- enable people affected by cancer to play a more active role in managing their own care;
- provide services which are more tailored to the needs and preferences of people affected by cancer;
- give people affected by cancer more support in dealing with the physical, emotional and financial consequences of cancer treatment; and
- improve integration between different service providers and provide more care locally.



Methodology

The Scottish Government is working in partnership with Macmillan Cancer Support, the NHS, local authorities, regional cancer networks, third sector organisations and people affected by cancer to support a redesign of care following active treatment for cancer. This work is being supported with investment of £5million from Macmillan.

Achieving the overarching aims

The programme will be driven through the three regional cancer networks and will support secondary care, primary care and local authority partners to review, redesign and test new approaches within an agreed framework and embed successful redesign approaches regionally and nationally.

The success of the programme will be measured against the following:

- Initiating and embedding an integrated and sustainable approach to the provision of care involving health, social care and third sector partners that drives a shift in focus from treating the disease to health and wellbeing.
- Creating a culture of confidence in patients and professionals, which supports people to regain control of their lives, facilitates self-management, develops new approaches to surveillance and reduces unnecessary reviews.
- Facilitating the establishment of shared decision-making with patients in cancer follow-up programmes that promote codesign of high quality, safe and person centred care.







There will be four distinct phases to the five year programme with each phase building on the learning gained.

Results

The programme developed a process for health, primary and social care, and stakeholders to apply for funding to test new models of follow up and recovery packages. Essential evidence to securing funding was the ability to demonstrate an integrated approach to the delivery of these new models. To date there are 26 transforming care partnership test sites demonstrating initiatives and activities which have been developed to support delivery of the quality ambitions.

Conclusion

There is significant change in attitudes and behaviours within the overarching steering groups, the local project boards and patient groups as to how we deliver together person centred care to people affected by cancer and a shared belief, that the only variable for a person with a cancer diagnosis is not now death.



References

- Information and Services Division. Cancer survival in Scotland 1987-2011. NHS National Services in Scotland. 2015
- www.macmillan.org.uk/

