

Transforming Care After Treatment

Newsletter – Edition 1, March 2014

Welcome to the first edition of the Transforming Care After Treatment (TCAT) newsletter. TCAT is a partnership between the Scottish Government, Macmillan Cancer Support, NHS Scotland and local authorities, to support a redesign of care following active treatment of cancer. The programme was launched by the Cabinet Secretary for Health and Wellbeing, Alex Neil MSP, in June 2013.

Background

The aim of TCAT is to support and enable cancer survivors to live as healthy a life as possible for as long as possible. As well as taking steps to improve the experiences of people affected by cancer following the completion of their treatment, critical to the success of TCAT will be the inclusion and integration of services across more than one sector, particularly with regard to managing the transition from acute to community.

Macmillan Cancer Support is providing £5 million over five years to facilitate the development and implementation of 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
- improve integration between different service providers and provide more care locally.

Programme Delivery

Leadership for the programme is provided by the TCAT Programme Board, which is chaired by Jeff Ace, Chief Executive of NHS Dumfries and Galloway. This consists of representatives from the regional cancer networks, primary care, Macmillan, the Scottish Government, the Scottish Cancer Coalition, local authorities and people affected by cancer. In addition, the Association of Directors of Social Work (ADSW) and the Convention of Scottish Local Authorities (COSLA) are fully supportive of the programme and are represented on the networks and programme board.

Day to day management of the programme is provided by the National Programme Manager, Gordon McLean and the regional cancer networks. Both SCAN and WoSCAN have established TCAT steering groups to support and guide the delivery of local projects and following the completion of the projects will promote the wider transfer of the impact of the successful projects across the region. As well as the steering groups SCAN and WoSCAN have a part-time TCAT Clinical Lead and a Project Lead supporting and promoting the work of the TCAT programme across the region. NOSCAN are considering how best to support the work of the programme across its wide geography.



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First Phase Projects

10 projects have been approved for phase 1 of the programme and will be supported with further development and implementation during 2014/15. These initial projects will be led by secondary care partners but with the inclusion of Local Authority, primary care partners and the 3rd sector.

NOSCAN

NHS Tayside and NE Fife - Pelvic and Head & Neck Cancers

This project aims to enhance the health and wellbeing of cancer survivors by supporting them in self-management and developing pathways that allow patients to access existing services and resources in their local communities.

This will be achieved with the introduction of a holistic needs assessment and an end of care treatment summary across all 10 cancer site specific teams and a co-ordinated programme of education and support which will be led by an experienced cancer nurse and advanced AHP co-ordinator. The project will initially concentrate on people with pelvic and head and neck cancers, building on the national work that has been done on the management of long term consequences of pelvic cancer treatment.

SCAN

NHS Borders - All Cancers

The team will establish a local Health and Wellbeing Support Programme for Cancer Survivors.

This will include tailoring cancer services to meet the needs of people affected by cancer and actively involving patients in planning and managing their own care.

Whilst also enhancing access to support systems that can help address any physical, emotional and financial difficulties that may develop through their cancer treatment.

Developing an integrated care pathway that creates links at local level with statutory and voluntary sectors and primary and secondary care will be essential to achieve this.

The project will include a comprehensive package of Holistic Needs Assessment, Patient Individual Care Plans, End of Treatment Reviews and Care Summaries for patient and GP along with local patient education and support events and a programme of physical activity.

NHS Dumfries and Galloway - Breast Cancer

The team have proposed redesigning the current follow up process for breast cancer patients by transferring appointments from hospital into primary care, where it is deemed appropriate. The project team will focus on implementing Holistic Needs Assessment, End of Treatment summary, formalise the application of cancer care reviews in primary care and ensure there is rapid access back into secondary care as required by the patient.

NHS Fife – Lung Cancer

The project team aims to establish a best supportive care clinic, which will provide an earlier and more proactive access to palliative care services, but where the emphasis is on promoting self management and patient & carer choice. The project will initially concentrate its efforts on patients with lung cancer before rolling out to all patients with advanced cancer. The project team will focus on developing a risk stratified pathway, and have the aim of reducing the number of unplanned admissions to acute hospitals and attendance at secondary care clinics.



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NHS Fife - Skin Cancers

The team will develop a more patient centred pathway to improve the care after treatment for all involved in the melanoma patient pathway.

This will be achieved through the introduction of holistic needs assessment and management plans. Patient self management groups will also be set up allowing the opportunity for psychosocial support as well as patient-led access back into secondary care following discharge.

At the end of treatment a summary will be sent to GPs and at the point of discharge, from secondary to primary care, patients will be offered the opportunity to 'opt in' to being sent a copy of their clinic letters.

NHS Lothian

This project will measure the immediate and intermediate benefits of a recovery-based approach for patients treated for prostate, breast, gynaecological, anal/rectal and lung cancer. This will involve preparing and informing people about what to expect after completion of treatment including follow-up, offering tailored advice on what they can do for themselves and how to access further sources of support.

Key areas will be the implementation of a holistic needs assessment, and an end of treatment review about care and treatment received. The project will measure benefits of conducting a supportive end of treatment approach to recovery, from the perspectives of both patients and health care professionals, and the feasibility of embedding this service in everyday care. A secondary objective will be to review the key concerns raised by patients and assess whether there are common themes for all patients or within specific tumour groups.

WoSCAN

NHS Ayrshire and Arran - Breast Cancer

By developing existing services, introducing new models of care, improving skill mix and creating services which directly relate to identified needs, this projects aims to improve cancer outcomes and the quality of life for breast cancer patients. This will be achieved by strengthening local and national cross sector partnerships and creating a map of services which allows easy navigation of services for patients and clinicians. An end of treatment summary and holistic needs assessment will also be introduced along with the promotion of brief interventions to help improve health and well-being.

NHS Forth Valley - Prostate Cancer

The aim of this project is to support patients to live as normal a life as possible with optimum quality, following a diagnosis of prostate cancer.

This will be achieved by developing a follow up service for patients with prostate cancer that is person centred and meets individual needs. Each patient will complete a treatment summary and a holistic needs assessment allowing individual care plans to be created.

NHS Lanarkshire – Lung Cancer

The project team aim to implement and evaluate the use of End of Treatment summaries, and Nurse Led End of Treatment reviews within an integrated model of follow up care for people with lung cancer. The project team wish to test the use of an e-health platform to support the completion of Patient Recorded Outcome Measures (PROM). The project team see the project enhancing inter and intra agency communication between health, social care and third party partners, all of which will improve patient outcomes.



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NHS Greater Glasgow and Clyde - Breast Cancer

The project will aim to create an effective transition from acute care at the end of treatment back into the community setting by strengthening the self management model.

Supporting both patients and colleagues to move from the conventional medical model of care to a more holistic person-centred model, which signposts patients and carers to support resources currently available, will be achieved by introducing a holistic needs assessment and a new questionnaire created by the multi-disciplinary team.

The key aim of this project is to carry out a quantitative and qualitative analysis of the effectiveness of the assessment and questionnaire which will include detailed analysis and patient and staff feedback.

Patient Reference Group

Work is progressing with establishing a patient reference group. The purpose of this group is to support the TCAT programme board in ensuring that people affected by cancer are at the centre of shaping how cancer services will be delivered in the future, through TCAT project developments.

The group will be involved in scrutinising and commenting on the development of projects and will be involved in the scoring and the prioritisation of projects during future phases of the programme. A support officer will assist the group with its work and the first meeting of the group should take place in May 2014.

Evaluation

Work is being progressed to establish a mechanism for assisting local projects to complete their identified evaluation requirements. The accumulation of any acknowledged impacts of the local projects will be used to help support the evaluation of the full programme.

Tenders will be sought during March 2014 from organisations to support the evaluation work with the aim that the preferred tender is in place to start working with the programme from May 2014.

Phase 1 Learn and Share Events



TCAT Learn & Share Event, 26 February 2014

A series of TCAT learn and share events will be taking place to support those involved in taking forward phase 1 projects, sharing the learning from the progress made during their development and implementation.



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TCAT Learn & Share Event, 26 February 2014

The 1st event took place on the 26th February. There was good representation from the projects and was well received. Attendees heard from colleagues from England and Northern Ireland on how they overcame local difficulties in progressing their local projects. This included introducing the HNA within the clinical setting, implementing an integrated health and social care model of care in Manchester, and transforming follow up services for patients with breast cancer across all of Northern Ireland.

The dates for the learn and share events will be as follows;

- Thursday 17th April in Stirling
- Friday 20th June in Glasgow
- Thursday 28th August in Edinburgh
- Friday 24th October in Glasgow

Phase 2 projects

The second phase of the programme will be launched in Autumn 2014, with priority being given to bids led by local authorities and primary care however it is anticipated there will be a larger number of projects being prioritised in this next phase.

The following details phase 2 timeframes:

- Expressions of Interests (EoI's) to be submitted by Friday 24th October 2014.
- Prioritisation of bids will take place at the end of November 2014.
- TCAT Programme Board will recommend the bids to be progressed during December 2014 with bids being supported with their development during 2015.

Key Programme Contacts

For additional information about TCAT or to make enquiries about submitting bids for phase 2 of the programme, the key programme contacts are as follows:

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TCAT Website

www.scotland.gov.uk/Topics/Health/Services/Cancer/TCAT



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