

Executive Summary

Report to the Board of Directors

Being Held on 25 July 2023

Subject	Long-Term Non-Surgical Oncology Model
Supporting TEG Member	Mark Tuckett
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Status¹	N

PURPOSE OF THE REPORT

To provide an update on the current progress and timeline for the SYB Non-Surgical Oncology (NSO) outpatients programme

KEY POINTS

Work is underway to develop and agree a long-term sustainable model for the provision of non-surgical oncology (NSO) for patients in South Yorkshire and Bassetlaw and North Derbyshire. The work is being led by the South Yorkshire and Bassetlaw Cancer Alliance.

An NSO service offers treatment to patients with cancer, including radiotherapy, together with systemic anti-cancer therapies (SACT), also referred to as chemotherapy and a range of immunotherapies. These services are led by both clinical and medical oncologists and supported by a multi-disciplinary team consisting of healthcare professional groups including radiographers, nursing and pharmacy colleagues.

This programme is focussing on outpatient services only and excludes the delivery of radiotherapy treatments, albeit new patients referred into the NSO service who require radiotherapy, will be included for their outpatient consultation only.

There are challenges affecting the current NSO service and the South Yorkshire and Bassetlaw (SYB) Cancer Alliance (CA) was asked to lead this review by the Cancer Alliance Board, to work with partners to develop a future sustainable outpatient service model.

An NSO Oversight Group was convened and tasked by the Cancer Alliance Board to oversee the approach and to provide that first line of scrutiny and guidance. Key stakeholders and decision makers from providers and commissioners in each locality are represented.

The key challenges facing the NSO service predate the COVID pandemic, when it was recognised nationally that there were significant shortages across the oncology workforce. This was further compounded by the pandemic with overseas recruits returning home, together with early retirements in the existing senior workforce. In parallel, there has been an increase in the demand for oncology services, partly due to the backlogs during the pandemic, but also due to the many new treatments and therapies that have become available over the last few years. Patients are living longer and as a result the management of their care is becoming more complex.

New treatments continue to be made available and this is expected to increase further in the coming years, particularly with the growth of immunotherapy treatment.

This review and programme of work need to outline and identify future NSO outpatient model options, based on the needs of patients, to maximise safety, to reduce clinical risk and variation and to invest in a sustainable model for the future. The review also needs to be cognisant of the workforce pressures and to maximise the resources available.

Temporary and incremental service changes have been introduced to maintain safe patient services from November 2021, with the number of oncologists being consolidated onto a reduced number of sites to

maximise patient access. This work was led by the SYB CA working with partners across its geography including the Joint Health and Overview Scrutiny Committee whilst keeping the Clinical Senate and wider NHS England colleagues informed of the urgent temporary changes.

The approach is to demonstrate collaborative working with reference to future outpatient models and to develop the appropriate supporting governance framework to support the change process as outlined in the Major Service Change Handbook (February 2022) and to meet the four-key tests for major service change:

- Strong public and patient engagement
- Consistency with current and prospective need for patient choice
- Clear and clinical evidence base
- Support for proposals from clinical commissioners

In accordance with the Major Service Change Handbook, the following key principles need to be considered when developing a robust future NSO OP clinical delivery model. These are as follows, accepting that **the underlying need for this review is founded upon an already fragile, at-risk consultant oncologist (clinical and medical) workforce which is likely to deteriorate further:**

- Design the service around the needs of the patient
- Patient safety and access to oncology services for all
- Reduce variation of access for patients across all tumour sites
- Incorporate patient choice
- Ensure the consultant oncologist and supporting workforce can deliver the model
- All patients have access to research and the full range of clinical trials
- SACT treatment delivery remains local and to expand further
- Radiotherapy treatment will continue to be available in Sheffield only at the Weston Park Cancer Centre (WPCC)
- All Inpatient treatments will continue to be delivered at WPCC

The overall vision for the NSO Outpatient service is to reduce inequalities of access, provide a more resilient service which can offer more personalised care.

This work is also within the context of an overall change process for SYB NSO Outpatient services. The first phase is to ensure stabilisation of services moving through to transformation over the next 5-10 years.

The drivers for change for the SYB NSO Outpatient Programme are:

- Improved patient experience
- Workforce pressures
- New and developing treatments



Progress to Date

- Case for change made during 2022 signed off by partner organisations
- Engagement has been carried out with local patients and stakeholder groups to determine “what matters most” for any future model
- Options appraisal development: engagement events/workshops and feedback from each Place on the behalf of partner organisations, is leading to a short list of potential delivery models.
- Currently developing definitions of minimum and maximum requirements for a hub and for a spoke
- *Hurdle* criteria (which any viable option needs to pass) and *evaluation* criteria for option evaluation are in development
- Peer review process is arranged for 6th Sept with two other Cancer Alliance areas and an independent clinical chair

Timeline

The aim is to complete the options appraisal process by early September for recommendation to decision making boards including Cancer Alliance Board, NHSE, and for review by the Joint Health Overview and Scrutiny Committee by October 2023.

IMPLICATIONS²

Aim of the STHFT Corporate Strategy		✓ Tick as appropriate
1	Deliver the Best Clinical Outcomes	✓
2	Provide Patient Centred Services	✓
3	Employ Caring and Cared for Staff	✓
4	Spend Public Money Wisely	✓
5	Create a Sustainable Organisation	✓
6	Deliver Excellent Research, Education and Innovation	

RECOMMENDATIONS

It is recommended that the Board notes the progress and timeline for the NSO Outpatient programme.

APPROVAL PROCESS

Meeting	Date	Approved Y/N
Board of Directors	25 July 2023	

¹ Status: A = Approval
A* = Approval & Requiring Board Approval
D = Debate
N = Note

² Against the six aims of the STHFT Corporate Strategy 'Making a Difference – The next Chapter 2022-27'