

**SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST**

**EXECUTIVE SUMMARY: REPORT TO THE TRUST EXECUTIVE GROUP**

<b>Subject:</b>	Presentation to Governors by the Cavendish Centre 2 April 2014
<b>Supporting Director:</b>	Neil Riley, Assistant Chief Executive
<b>Authors:</b>	Andrew Manasse and Anne Eckford, Public Governors

**PURPOSE OF THE REPORT:**

To provide feedback for the benefit of the Council of Governors and Trust Executive Group
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**KEY POINTS:**

<ul style="list-style-type: none"> <li>▪ Established in 1991, the Centre is an independent local charity offering an enormously valuable support service to people with cancer and their families.</li> <li>▪ It covers Sheffield and South Yorkshire, NE Derbyshire and Nottinghamshire</li> <li>▪ It offers services to patients in the community and to patients attending STH</li> <li>▪ Funding arrangements with STH are complex and more flexibility would improve the service and enable more patients to be seen</li> </ul>
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**RECOMMENDATION(S):**

<b>Governors suggestions</b>	<b>TEG Response</b>
<p>1. That the work of the Centre be well publicised throughout the relevant directorates.</p> <p>2. That there be communication between relevant nurse directors at STH, and the Cavendish Centre to facilitate the Trust making more and better use of the services of the Centre.</p>	<p>1. The Cavendish Centre is an independent local charity. It is one of a range of third sector organisations which the Trust works with to deliver services to our patients.</p> <p>2. Whilst the work of the Centre is well publicised across the Directorate of Specialised Cancer, further publicity of the Centre's services would be very appropriate to ensure an equitable service across the organisation for all patients with a cancer diagnosis and long term conditions where appropriate.</p> <p>The co-location of the service to WPH is advantageous in promoting the service and opportunities in outpatient departments and ward settings and through Clinical Nurse Specialists at NGH and RHH could provide a solution.</p> <p>The provision of single, generic Service Level Agreements would assist in providing greater flexibility for the therapist to work across the Trust which could be initiated at the outset when funding agreed.</p> <p>The Centre is generally well accessed by patients attending WPH with some from the Head and Neck pathway.</p> <p>Encouraging communication between Nurse Directors (or their deputies) and the Centre could help ensure the work is well embedded into every aspect of the cancer pathway, diagnostic, treatment and palliation, embedding the services and facilities early into the cancer pathway and promoting an equitable service across the Trust.</p> <p>A meeting is to be held with the CEO of the Cavendish Centre to agree a way forward</p>

**PRESENTATION TO GOVERNORS BY THE CAVENDISH CENTRE**  
**2 April 2014**

**Present:**

Anne Eckford  
Caroline Irving  
John Laxton  
Andrew Manasse  
David Owens  
Kath Parker  
Hetta Phipps  
Sue Taylor  
John Warner  
Myra Wilson Governor from SHSCT  
Shirley Harrison, NED  
Mandy Yates, Nurse Director, Specialised Cancer, Medicine and Rehabilitation.

The presentation was given by Rebecca Allinson, CEO Cavendish Centre, Ann Hetherington who works as an assessor there and also part manages therapy services and Margaret Dennison who has been a patient at the Centre.

The Cavendish Centre is an independent local charity, started in 1991 with the aim of providing a peaceful place where people with cancer and their families could discuss their concerns, could be heard by trained professionals and could be advised and receive appropriate therapies – not for their cancer itself but to help with everything else that goes with it. These therapies would be free and would be integrated with their cancer treatment.

Over 1500 patients, carers or children are seen each year and over 5,500 separate therapy sessions offered. Patients come from Sheffield and South Yorkshire, from NE Derbyshire and from Nottinghamshire.

There are 9 staff – 6 whole time equivalent, 31 therapists and assessors who are self-employed, and numerous dedicated and well-supported volunteers. The therapists are all appropriately trained and registered, and experienced in working with people with cancer.

Patients are seen at the Centre, in Wilkinson Street, and out-reach services are also provided. These are within STH and take place on wards 2 and 3 of Weston Park Hospital (WPH), Cancer Support Centre at WPH, at the MacMillan Palliative Care Unit at the Northern General Hospital in the Cystic Fibrosis Unit and sometimes on other wards in the Trust. Support for staff is offered at, and paid for by, St Luke's Hospice.

Patients normally self-refer but attendance is frequently suggested by a consultant or a specialist nurse. There is no waiting list – patients are seen within 5 days. They receive an hour-long assessment followed by four sessions of therapy that can be arranged over any suitable time period. Finally there is a review with the original assessor where the outcome is evaluated and further steps discussed.

Therapies are chosen from counselling and a range of complementary therapies, all of which have an evidence base relevant to their use in this context.

There is a specialist service for children and young people; this is aimed at those where there is a parent or close relative with cancer, rather than at young people who themselves have cancer as their needs are well met at the Children's Hospital.

We heard a detailed description of the assessment and therapy rationale and process, including that of evidence based evaluation, and a moving description of a patient's experience of cancer and of being helped at the Centre. We also had a discussion about practical issues, particularly funding.

The Centre needs about £500k to provide the services described. This equates to about £328 per person for a full course of treatment. The CCG contributes £30,000 p.a. (c. 6%), and about £120,000 comes from specific funds to cover the cost of the out-reach services. The Centre therefore has to raise between £350,000 and £380,000 per annum to keep thriving.

Funding for the outreach services is complex and seems not to be wholly satisfactory. The services in the Cancer Support Centre are funded by WPH Cancer Charity. The other out reach services are funded by Sheffield Hospitals Charity, but each from different pots that seem to be quite inflexible. For instance if on Ward 2 or 3 in WPH there are no patients needing help from the Cavendish Centre, but on a different ward there is an adolescent patient who does need help, this is not possible, because the funding cannot be used there; in other words, funds are not transferable from one ward or area to another when needed. There are times when other wards request help for patients and treatment is often given, but the Centre has to bear the cost, as there is no mechanism for payment.

What we learned is that the Cavendish Centre offers what is probably a unique service that is enormously valuable, and may be life changing, for families with cancer. It offers services both within the community and to patients in or attending hospital. We were told that it may well be that patients attending the Centre make fewer demands, both in time and money of the NHS than those who do not. The Centre continually struggles for money. It could see more patients and offer a wider range of services with more flexible funding arrangements. It may be that as a Trust, we are not making as good a use of the Cavendish Centre as we might.

This is a brief summary of a very comprehensive presentation. For those who wish to learn more about any aspect of what the Cavendish Centre offers, there are open afternoons for health professionals, and other ways of learning more.

The website is at <http://www.cavcare.org.uk>

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Public Governor South West Sheffield

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