

Peninsula Cancer Alliance CRC Update

January 2020

Peninsula Cancer Alliance: Q2 2019/20 Colorectal Pathway Transformation Report

SW Improvement Project Approach:

The Peninsula and SWAG Cancer Alliances are joining forces to deliver a South West England quality improvement project designed to support colorectal teams with the delivery of the day timed pathway and the standards set out in the 2017 publication Clinical Advice for the Provision of Bowel Cancer Services.

We have appointed 2 clinical leads, Mel Feldman and Mike Thomas as the SW Alliances' clinical leads for this project. This project is intended to be a peer review formative exercise inspired by the 2016 Peer review of Emergency General Surgery in the South West led by Paul Eyre's; sharing good practice and pragmatic solutions assisting you to do the very best for your cancer patients.

This project will run during the Autumn and Winter 2019. **We will be liaising with MDTs and cancer services team to gather data and then will make a site visit on.** This was one of the great strengths of the EGS peer review – an opportunity for us to talk to colleagues around the region and share ideas. Doubtless the competing demands of cancer services, benign services and emergency services make change management complex and it is important to avoid breaking one service in order to improve another. We can only dig deep into the way these issues impact on your service by visiting you.

The peer review itself will involve talking to a group of patients and a group from the MDT. **We would welcome speaking with patients, CNSs, managers, and the consultants involved in delivering care and reviewing your data together.**

At the end of the site visit we would also ask that we present the provisional report to the Medical Director and/or chief executive or their representative at 4pm.

We will contact you again 6 months after your visit to give you an opportunity to report back on improvements you have been able to implement.

Data:

Baseline of current practice to get a snapshot of the current practice across the South West. This will allow us to understand challenges, drawbacks and good practice in a standardized approach to identify data driven areas of improvement and allocate funds to support Trusts in prioritized/identified areas. Thus, the sent out request (enclosed in this email), seeking support from trusts to fill out templates with two primary outcomes:

1) **Scenarios template** – To develop process maps of current processes at each trust from the moment patient were referred through 2WW to treatment. Based on the referral form we have a possibility of 420 different scenarios, 6 scenarios were generated with the support of the clinical lead and cover most of them (they were not selected randomly) . This allows us to evaluate best practices/drawbacks across SWAG and assess how each provider manages different cases with their current resources.

2) **Timeline Template**- Get a baseline data for patients referred in February & March through 2WW at every trust.

Those templates will enable to create a standardized data portfolio for all trust across the South West identifying primary gaps & best practices.

Site visits which are expected to start in October, 2019. The site visit is one of the most crucial areas of this project as it is an opportunity to maximise all the 'grey' outcomes across the SW through peer group networking, sharing of ideas & shared learning. A portfolio will be shared ahead with the outcome of the templates that were completed to guide us through the visit, there will be an interview with the MDT which is an opportunity to hear stories, successes, concerns, and to hear what the team have been doing to try to deliver the service. We will be speaking with patients, CNSs, the consultants involved in delivering care and reviewing their data together. After the discussion a preliminary report will be presented to the team and executives to demonstrate all the things the team are doing great and where challenges requiring managerial and resources support are highlighted.

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Complete this quarter (Q1/2):

Project Scope & Data Collection Plan

- Identify drawbacks in current pathways and timeliness at provider level. Data portfolio, current pathway + pathway steps mean/median for Feb/Mar 2019 will be developed for each provider.
- Access NBOCA report for each trust
- Agreement with clinical leads to request data at trust
- Information Gathering Plan template developed (outline description of service, protocols, assessment of problems, description of things trusts are proud to do well) to be sent to MDT leads & Cancer Managers to be sent before site visits. To be sent 2nd September 2019.
- Most recent NCPES Report
- First CRC Steering Group 25th July 2019. Project approach discussed and approved.
- Invitations for site Visits sent 19th August 2019.

Priorities for next quarter (Q3):

- SWAG PCA CL peer visits to meet teams, understand good practice, local challenges/barriers to delivery. Volunteers are welcome to support CL & PM in site visits to maximize networking, sharing ideas & learning opportunities.
- Analysis of Information gathering plan (deadline for return 30th Sep, 19) and trust data portfolio.
- Identify gaps in practice and proposed change ideas for sustainable improvement fit for future
- Site visits scheduled Nov, 19- Feb, 20
- Peer review will include
 1. Meeting with MDT group to review data
 2. Qualitative structured interview with MDT
 3. Patient group
 4. Meeting with MDT and MD/Executives

Individual reports will be shared with each trust 2 weeks after peer review.

Q3 Data requests Status & Site Visits dates

PCA Providers	Timeline	Scenarios	Information Gathering Plan	Site Visit Date	Site Visit Status
Torbay & South Devon	Received with different format. Requested new data extract to get more accurate numbers	Received- Requested further information	Received	06-Jan-20	Confirmed
Royal Devon & Exeter	Not Received	Received- Requested further information	Received	11-Nov-19	Confirmed
North Devon District Hospital	Received	Received	Received	07-Feb-20	Confirmed
Plymouth Hospital NHS Foundation Trust	Received	Received	Received	01-Nov-19	Confirmed
Royal Cornwall Hospital Trust	Received	Received	Received	17-Jan-20	Confirmed

Peninsula Cancer Alliance: Q3 2019/20 Colorectal Pathway Transformation Report

Complete this quarter (Q3)

CRC Peer Reviews completed at 4/5 PCA Trusts. Peer Reviews were well received by CRC teams at Trusts Level.

- Plymouth NHS Foundation Trust - Visit date 1st Nov, 19

Safety concerns identified: Pathology reporting time, Access to GI theatre- Safety alert was raised to PCA clinical lead on 12th Nov, 19

- Royal Devon & Exeter- Visit Date 11th Nov, 19

Safety concerns identified: Access to GI theatre (highlighted by the team but no evidence to support)

- Torbay and South Devon- Visit Date 6th Jan, 20

Safety concerns identified: None

- Royal Cornwall Hospital Trust – Visit Date 17th Jan, 20

Safety concerns identified: None

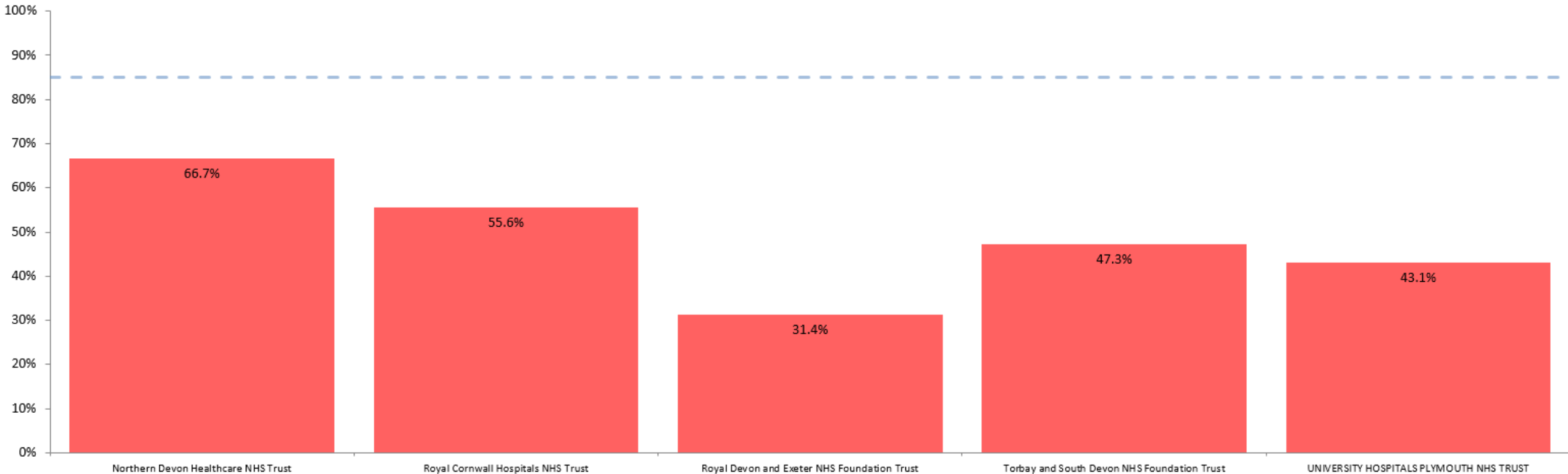
Priorities for next quarter (Q1):

1. NDH Peer Review scheduled on 7th Feb, 20
2. Individualized Peer Review Reports to be sent to Trusts
3. Final SW Cancer Alliance CRC Peer Review Report to be released in April 2020

Apr, 18-Dec, 18

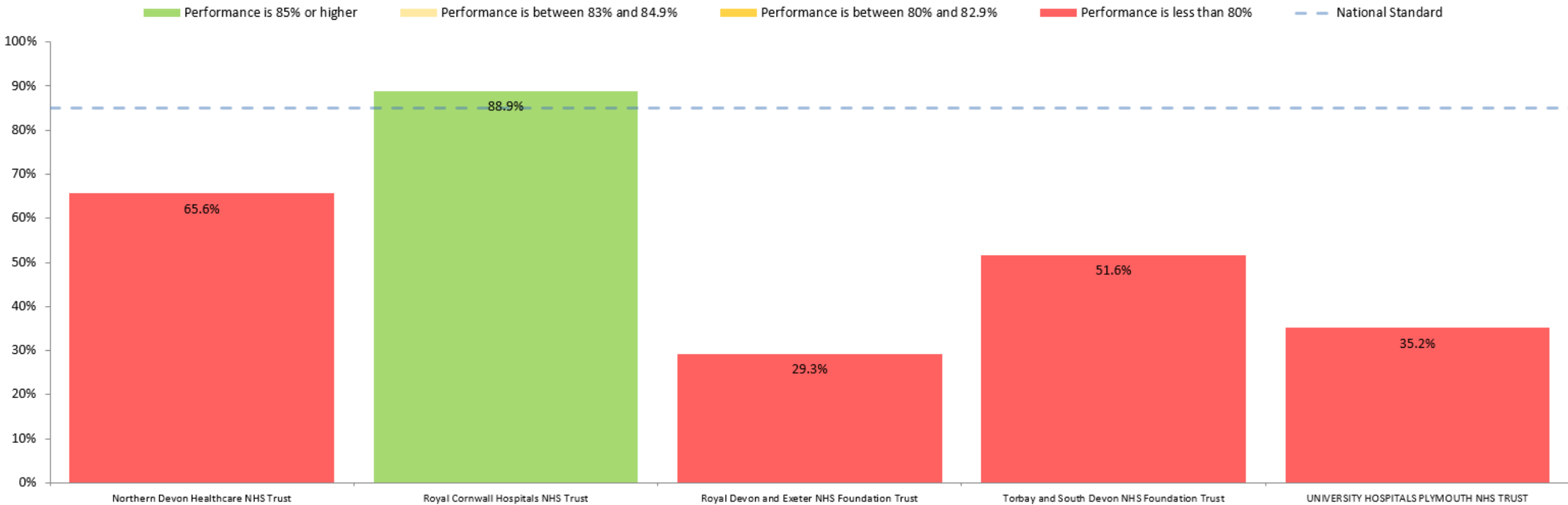
Provider Activity: Peninsula - Cancer Type: Lower Gastrointestinal, Period: Multiple

Performance is 85% or higher Performance is between 83% and 84.9% Performance is between 80% and 82.9% Performance is less than 80% National Standard



Jan,19-Apr,19

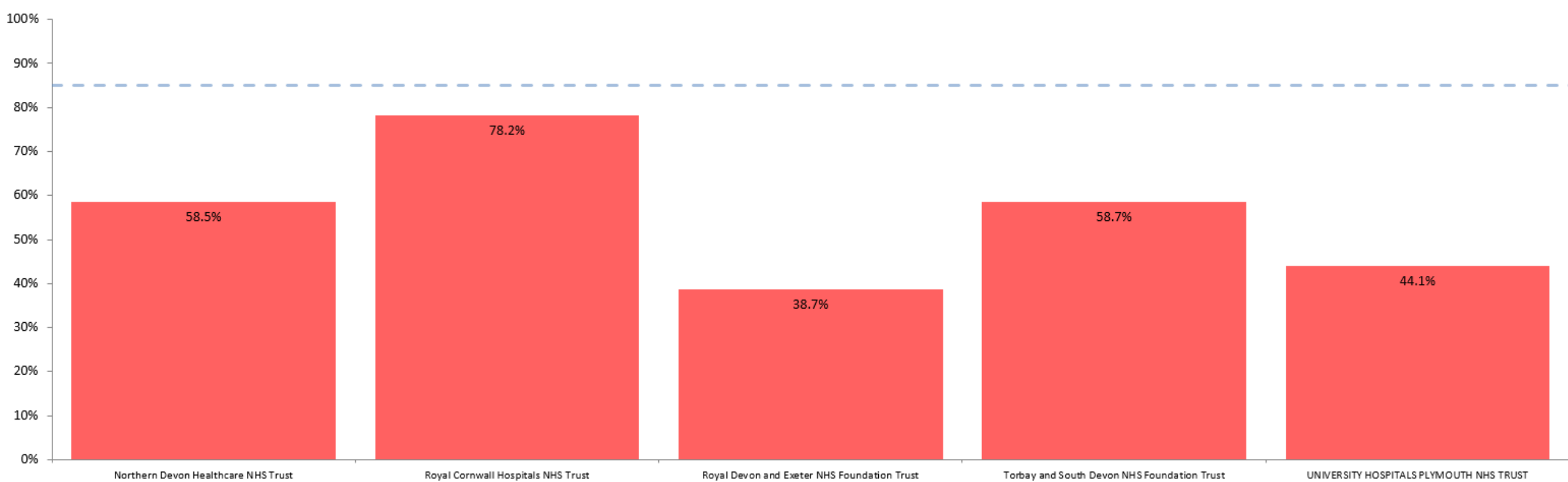
Provider Activity: Peninsula - Cancer Type: Lower Gastrointestinal, Period: Multiple



May, 19-Aug, 19

Provider Activity: Peninsula - Cancer Type: Lower Gastrointestinal, Period: Multiple

■ Performance is 85% or higher
 ■ Performance is between 83% and 84.9%
 ■ Performance is between 80% and 82.9%
 ■ Performance is less than 80%
 - - - National Standard



Sep,19-Nov,19

Provider Activity: Peninsula - Cancer Type: Lower Gastrointestinal, Period: Multiple

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 ■ Performance is between 83% and 84.9%
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 - - - National Standard

