

Humber Acute Services Review

Review Update (July 2018)

Wave 1: Haemto-Oncology services

SUMMARY

Haemto-oncology is the diagnosis and treatment of all blood cancers. This includes patients with lymphoma, myeloma and leukaemia. Due to the rarity and complexity of haemto-oncology services, they are directly commissioned by NHS England Specialised Commissioning across a broader geographic footprint than those services routinely commissioned by local Clinical Commissioning Groups (known as CCGs).

Haemto-oncology services within Northern Lincolnshire and Goole NHS Foundation Trust (NLaG) have been subject to a change to outpatient arrangements since the beginning of 2018. Outpatient care for these patients is currently being delivered from Hull and East Yorkshire Hospitals Trust (HEY) at its Castle Hill site. This change was put in place due to significant quality and workforce issues and other factors that made the service fragile such that it was not possible to safely operate all aspects of the haemto-oncology provision across both the Scunthorpe and Grimsby sites.

Haematology services is one of the featured three services that are subject to the wider 'Acute services review' for the Humber, Coast and Vale. Both NLaG and HEY now have clinicians and staff working together to progress delivering haemto-oncology services as part of a clinical networked approach. With a project board in place, this network is working towards developing, implementing and evaluating changes to ensure the short and long term sustainability for a safe, effective and sustainable haematology service provided in the most appropriate clinical setting. This work is supported by NHS England Specialised Commissioning, through a team based in its Yorkshire and Humber hub, for assurance on delivery and strategic oversight.

As well as the changes in place for outpatient arrangements in haemto-oncology services, the clinical teams are working towards stabilising inpatient arrangements (for those that require an overnight stay in hospital) through provision from the Castle Hill site in Hull. Clinicians estimate this would affect between three and six patients on a weekly basis that would previously have accessed this care at Scunthorpe and Grimsby sites.

It is important to note there a range of specialised services that patients within the North and North East Lincolnshire area travel to Hull for to receive their cancer care, due to the specialised nature of their condition. It is where the vast majority of specialised cancer services are delivered including radiotherapy services, as well as specialist care for pancreatic and prostate cancers.

This briefing sets out the background to this position for haemto-oncology services at NLaG, and provides further information and assurances around the networked arrangements currently in place to ensure service sustainability. It covers:

- Background information
- Acute services review, clinician network arrangements and objectives
- Plans to address service pressures (work stream activity and progress)
- Communications and engagement and next steps

BACKGROUND

North Lincolnshire and Goole Hospitals NHS Trust (NLaG) Chemotherapy services compliance status is stated with NHS England as being in 'provider action', a term used when commissioners identify an issue with a Trust that requires an improvement. This was due to non-compliance in meeting the service specification requirements relating to mandatory delivery of all tumour site regimens through the e-prescribing system.

Specialised commissioners are responsible for the commissioning of this service within the Yorkshire and Humber (Y&H) hub and had been working over the 17/18 financial year with the trust to resolve this and bring to a timely resolution.

Through contractual discussion with the trust and identifying a number of the internal NLaG project milestones not being delivered a meeting was requested between the commissioners and the clinical and management team at NLaG in August 2017. This was for ongoing assurance purposes and to understand any blockers and barriers for compliance.

This meeting was perceived to be successful between all parties. It did as a consequence raise a number of quality concerns and formed a substantial action plan for the trust to review and address. These were discussed with NHS England hub senior management team and the regional leadership group for Specialised Commissioning in the North of England as a matter of concern relating to haematology delivery and practices within the trust.

In December 2017, to ensure clinical and quality practices within the organisation were being adhered to as per the service specification requirements Y&H hub specialised commissioners requested the Quality Surveillance Team (QST) to undertake a rapid peer review on the Chemotherapy service. This was requested to have a particular focus on the delivery of the Haemto-oncological element of the service. Haemto-oncology is the diagnosis and treatment of all blood cancers. This includes patients with lymphoma, myeloma and leukaemia.

Haematology services across North Lincolnshire and Goole Hospitals NHS Trust (NLaG) are considered 'fragile' along with a number of clinical services. This has been due in the main to a number of vacant substantive consultant posts across that undermines the sustainability of these services, with HEY also experiencing significant workforce capacity issues.

ACUTE SERVICES REVIEW, CLINICAL NETWORK ARRANGEMENTS AND OBJECTIVES

Acute services review and clinical network arrangements

Haematology services is one of the featured three services that are subject to the wider 'Acute services review' for the Humber, Coast and Vale. There is a continued risk in delivery across both NLaG and Hull and East Yorkshire Hospitals Trust (HEY) as the specialised cancer centre within the cancer alliance footprint. As part of this work, a project team for haemto-oncology will ensure a consistent approach is undertaken and that all stakeholders are fully informed and aware of all aspects of the work.

An added consequence is the impact on Haematology services provided in the district general hospital (DGH) haematology services which are commissioned by Clinical Commissioning Group (CCG) colleagues.

The potential solution will ensure ongoing future sustainability of these services through collaborative working.

The clinical teams at both HEY and NLaG have formed a joint clinical and managerial network. This will evaluate, develop and implement changes to ensure the short and long term sustainability for a safe, effective and sustainable haematology service.

This is now supported by NHS England specialised commissioner for assurance on delivery and strategic oversight. From January 2018 NHS England specialised commissioners have been involved in discussions and are part of the Hematology Network Board which now meets every six weeks to provide assurance on the progress and implementation of the project. Oversight on progress is provided through service specialist input to the senior management team within specialised commissioning. There is a commitment to ensuring this work aligns with the principles and methodologies of the wider system 'Acute services review' and takes into account the wider fragility of services within the Humber, Coast and Vale region.

Identified benefits

The clinical and management teams within the project board have identified the following benefits to this project:

- Safe, sustainable quality driven clinical delivery model for the patients of NLaG and HEY for Haemto-oncology services in the first instance
- Promoting, addressing and reducing inequalities in patient care
- Then facilitating a wider oncology service review across the system
- Promoting a collaborative, flexible workforce that will attract and encourage health professionals into the system
- Improved workforce engagement, capacity, levels of training and overall satisfaction
- Ensuring compliance on delivery of the Chemotherapy service specification
- Improved patient experience

Actions to date and future deliverables

The project has been developed through necessity to ensure the ongoing delivery of a safe, quality, sustainability service for Haemto-oncology care is maintained with the NLaG and HEY region. Management teams within both Trusts have established weekly meetings to develop and implement short term actions to ensure safe service delivery continues for patients. Additionally a weekly teleconference between the two organisations has been established.

A number of immediate actions have been completed in order to minimise the potential clinical risk posed by the NLaG staffing shortages and peer review findings, these include:

- Transfer of complex outpatient regimens (6 regimens) to HEY from NLaG with immediate effect
- Engagement with commissioners (NHSE/CCGs)
- Regular clinical Multi-Disciplinary Team (MDT) meetings
- Weekly managerial teleconference

- Development of a comprehensive action plan addressing the peer review findings
- Elective pathway confirmed by both Trusts
- Establishment of a treat and transfer protocol for acute admissions drafted

A further set of key project objectives have been agreed for future work:

- To develop a safe, quality driven, sustainable haemto-oncology service
- To develop a flexible, workforce that can meet the requirements of the service
- To ensure quality of service provision is at heart of service provision
- To ensure that e-prescribing / SACT is utilised throughout the delivery model
- To ensure financial sustainability and recognise areas of best practice to make efficiency savings
- To move to a lead provider contractual model for chemotherapy services between HEY and NLaG

PLANS TO ADDRESS SERVICE PRESSURES

The initial phase of the project is providing support to the existing service to ensure service sustainability across both Grimsby and Scunthorpe sites.

The second phase will then look to bring the Inpatient Haemto-oncology service for NLaG under the HEY service.

The below recommended approach has been developed in partnership between the clinical and management teams, at both providers as a solution to the current service issues. Whilst addressing the need to future proof the services for future ongoing sustainability.

Recommended approach – Phase One

To develop haematology services across the NLaG and HEY network to ensure a safe and sustainable service, the focus is now on the HEY team to release inpatient capacity at the Queens Centre to enable the NLaG inpatients to be transferred.

Current HEY Work Stream Progress:

- Nurse Led Chemotherapy delivery in Haematology services – Started late February 2018
- Walk in and Assessment Unit, including single telephone triage line – started April 2018
- Ambulatory Chemotherapy for Haematology patients – started April 2018

Current NLAG Work Stream Progress:

- Changes to outpatient configuration
- Implementation of the peer review recommendations

Both HEY and NLaG have an individual project group which identify and monitor the actions against each work stream. Updates are given at each project team meeting and where necessary the weekly teleconference. These in turn are monitored for assurance of delivery/governance through the Strategy Board.

Recommended approach - Phase Two

Once HEY has released inpatient capacity through their work streams above, the proposed plan will be to transfer the haematology inpatients from both NLaG sites to HEY.

HEY require a period of time to embed the walk in and assessment unit and the ambulatory chemo model before the transfer of NLaG inpatients can take place.

The proposed start date to patriate Grimsby inpatients on the HEY site is proposed September 2018, with Scunthorpe inpatients following on shortly after. The above HEY work streams will continue to be monitored throughout the period of implementation and if capacity is released earlier the inpatients will be patriated earlier.

Planned workstreams:

- HEY to take tele triage calls for NLaG
- Grimsby inpatient transfer
- Scunthorpe inpatient transfer

To support this HEY will start to take the triage calls from NLaG prior to inpatient transfer. A small group will be established to develop the triage pathway to ensure patients can be admitted on both NLaG sites once HEY start the triage.

COMMUNICATIONS AND ENGAGEMENT AND NEXT STEPS

There is a commitment to ensuring that staff, patients and the wider population is kept informed on developments to date within this service and the next steps.

The table below sets out a summary of activity to date and outlines broad principles for engagement and monitoring of haemto-oncology service user feedback going forward within both NLaG and HEY. Further information and details of the communications plan can be provided on request.

PHASE 1- Communications with patients, staff Public	Joint communications brief to public on transfer of patients from Grimsby November 2017
	OSC Minutes October 2017 http://webarchive.northlincs.gov.uk/councilanddemocracy/scrutiny/health-scrutiny-panel/minutes/health-scrutiny-panel-30-october-2017/
	NLAG Trust Board Minutes November 2017  NLG17447-Trust-Board-Public-Minutes-dra
	Patient communications (leaflets)
Phase 1 – monitoring of changes (Both Trusts where applicable)	Monitor Friends and Family test in Haematology
	Monitor Complaints & PALs
	Sample Questionnaires in Assessment Unit and Day Unit
	HEY Haematology annual report comparison 2017/18 v

	2018/19
	Continued discussions with Overview and Scrutiny
PHASE 2 – Communications with patients, staff and public (Both Trusts where applicable)	Patient communications (leaflets)
	Link with patients groups
	Staff briefings
	Liaison with Healthwatch
	Social Media posts
	Communications via local media
	Focus groups
	Continued discussions with Overview and Scrutiny
PHASE 2 – Monitoring of changes (Both Trusts where applicable)	Monitor Friends and Family test
	Monitor Complaints & PALs
	Sample Questionnaires for inpatients
	HEY Haematology annual report comparison 2017/18 v 2018/19
	Continued discussions with Overview and Scrutiny

This update paper has been prepared by NHS England Specialised Commissioning who are leading on the review of Haemato-oncology services on behalf of the Humber Acute Services Review partners.

For further enquiries, please contact Sharon Hodgson (NHS ENGLAND) sharon.hodgson1@nhs.net