



Non-Surgical Oncology Transformation Programme

JHOSC Meeting 10th October 2024



Introduction

Purpose:

- Provide an update on the NSO Transformation Programme
- Provide an update on the progress to date on the Stabilisation Phase of the programme
- Provide assurance on the mitigations in place as part of the Stabilisation phase

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The ask of JHOSC members:

- 1) **Note** the approach to the NSO transformation programme
- 2) **Note** progress being made during the Stabilisation Phase, including the temporary development of a fourth lung clinic site for Rotherham and Barnsley patients



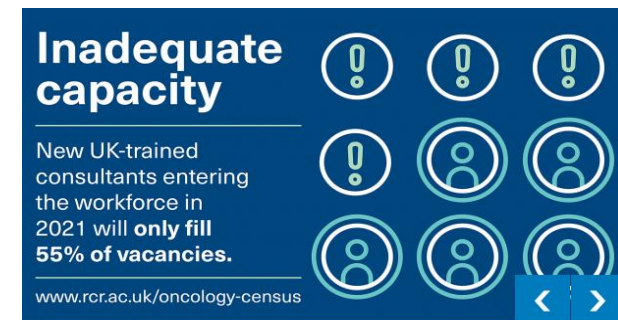
The Case for Change



Why do we need to change?

- **Workforce** :There is a **national shortage** of Consultant Oncologists with insufficient trainees to bridge the gap
- **Increasing demand**: Many new treatments and therapies are becoming available. Patients are living longer and as a result their management is becoming more complex.
- **Variation** : there is variation in the delivery of the commissioned model across South Yorkshire, Bassetlaw and North Derbyshire
- **Advancing roles** allow for a “Consultant Led: Team Delivered approach” which is less reliant on the oncologists
- **Technology Advances**: there are significant advances in technology offering more patient-led opportunities to feed into care planning , remotely and face to face

The Workforce Challenges





The NSO Transformation Programme

The NSO programme includes Outpatients, Inpatients, day case treatment, referred to as Systemic Anti-Cancer Therapies (SACT) and Acute Oncology services.

The purpose of the NSO transformation programme is to:

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- Improve clinical safety and reduce clinical risks
- Tackle inequalities to access: not just geographically, but equally to the full range of treatment modalities and access to research and clinical trials
- Address sustainability challenges including workforce sustainability

We are doing this in a phased way to develop, test and learn as an approach to change



Stabilisation Phase Changes

- We have **taken the feedback from patients/public and staff** to build into the proposed clinical models
- We know that **patient safety and outcomes , continuity of support, travel and access** are all important

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For the stabilisation phase we are focussing on further development of the clinical teams so that **cross cover can be provided and will be more resilient**

- We are **consolidating the number of sites that offer face-to-face appointments** to ensure that a safe service can be provided but still offering choice
- We are exploring different ways of working e.g. **enhanced virtual clinics** for Barnsley and Rotherham patients



Mitigating the impact

- ✓ Increased access to **charitable transport**
- ✓ Developed a **supportive care pathway** – initially in breast providing additional nursing to support continuity of care
- ✓ Identifying sites with **good parking** e.g. Breathing Space
- ✓ Adoption of **non-face to face** appointments to reduce patient requirement to travel
- ✓ Repatriation of treatments – *more patients are getting their chemotherapy closer to home*
- ✓ **Recruitment** and workforce development strategies
- ✓ Ensuring **Oncologists are only doing what only they can** do by maximising utilisation of **non-medical** workforce e.g. development of Advanced Clinical Practitioner roles, Cancer Nurse Specialist development
- ✓ **Improving operational working**: regular system-wide operational meetings focussed on enhancing patient experience, service improvement plan



Stabilisation Phase Update

Workforce: Oncologist Recruitment

- STHFT has been successful in the recruitment of an additional 4 Breast consultant oncologist posts, which is a significant achievement in the current national market for Oncologists.

Patient Access

- We are piloting an enhanced virtual model in Barnsley for Urology and Lung patients which offers local access with team support in a more accessible location for patients. As part of this pilot, patient and staff feedback is being captured to feed this into the future model work.

NSO Longer term Model

- Work continues the development of the future NSO model with the agreement of a high-level clinical model.
- The future model has been developed incorporating the feedback from staff, patients and the public, highlighted at the JHOSC meeting on the 7th December

Service Level Agreements

- Progress is being made on the review and revision of the Service Level Agreements with a proposed financial framework to support the updated SLAs.



Stabilisation Phase Update

NSO Fourth Lung Clinic

As part of the Stabilisation phase, it was agreed to look at a fourth site for an NSO lung clinic for the populations of Barnsley and Rotherham, to support **patient and clinical safety, team resilience and patient access**.

- An evaluation process has been carried out with a requirements letter sent out to Place commissioners, evaluation criteria agreed, a travel analysis and Equality Health Impact Assessment carried out.
- The feedback from the patient, public and staff engagement informed the evaluation criteria, in particular the travel analysis
- Clinic activity data was analysed along with health population data including the incidence of lung cancer across Barnsley and Rotherham
- **Page 9** Three locations were considered including a site mid-way between Rotherham and Barnsley as an option, the Montagu Mexborough site.
- A multidisciplinary panel of Barnsley and Rotherham representatives including patient representation, was established to carry out the evaluation and to make a recommendation.
- This has resulted in Rotherham District General being proposed as the temporary fourth site for Barnsley and Rotherham patients.
- This recommendation is being taken through the appropriate governance routes for approval supported by a communications plan for staff, patients and carers.

Additional mitigations are being put in place:

- Pilot of an enhanced virtual clinic for lung patients in Barnsley, with access to the oncology team on site with remote oncologist input
- Additional volunteer and charitable transport expansion
- Continued repatriation of Systemic Anti-Cancer therapies locally to provide treatment closer to home



Recommendations

We would like to ask the JHOSC to:

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- 2) **Note** progress being made during the Stabilisation Phase including the temporary development of a fourth lung clinic site for Rotherham and Barnsley patients



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