



Personalised Care, Wessex Cancer Alliance Board Report

Report to the Wessex Cancer Alliance Board				
Title:	Personalised Care Programme Updates			
Sponsor	Jane Winter			
Author	Stephanie Heath			
Date:	September 2021			
Purpose	<u>Assurance or reassurance</u>	Approval	Ratification	Information
Summary of paper:	Outline of personalised care programme – key activities, achievements/progress to date against targets and plans going forward.			
Implications: (Clinical, Organisational, Governance, Legal?)	<p>Clinical – outline of Right by You service development plans/service evaluation, plans for self-management measure development and implementation – impact across clinical pathways</p> <p>Governance – limitations to current data collected re: personalised care interventions</p>			
Key risks and mitigations:	<ul style="list-style-type: none"> • In current pressured climate, risk of not realising release of activity via initiatives such as PSFU if not fully implemented • Personalised care interventions – addressing standardisation of reporting, how do we ensure quality support (right place, right time, right person) • Inequity of provision – PSFU pathways and resources for patients • IT delays impacting progress 			
Summary: Conclusion and/or recommendation	<ul style="list-style-type: none"> • Requires system-wide approach and buy-in to support culture/behaviour change • Progress is being made in PSFU and there is significant appetite to develop new pathways • Support required at Trust and ICS leadership level to progress key initiatives to provide quality and equity of service user experience (e.g. influencing clinical buy-in and prioritisation of Digital enablers – Remote monitoring systems/patient portals) • Impacts of personalised approached will benefit all patients throughout their cancer journey 			



Personalised Care Programme Overview



Personalised Interventions

- Ensure the four main personalised care interventions and available **for all** cancer patients
- Personalised Care and Support Planning (PCSP)
- HNA
- Health and Wellbeing Information and Support
- End of Treatment Summary
- Cancer Care Review

Supported Self-Management

- Introduce a model of care that stratifies patients to an appropriate level of supportive care based on complexity of need and capacity to self-manage **throughout their** cancer journey.

Personalised Stratified Follow Up

- Agree clinical protocols for personalised stratified follow up (PSFU) pathways in at least 3 additional cancer types by April 2022
- Fully implement at least one of the three
- In addition to the existing requirement for PSFU to be implemented with digital remote monitoring systems (RMS) in breast, colorectal and prostate.

Quality, experience & performance

- Promote and support the delivery of the Cancer Quality of Life Survey to achieve a response rate of at least 50% by April 2022
- Support the implementation of the 2021 National Cancer Patient Experience Survey (CPES)

Workforce Culture

- Identify personalised care champions in every cancer team
- consensus building to determine the most effective personalised care interventions, and training for the workforce to deliver them.

Whole Population/Whole Pathway

Targeted

Influencers & Enablers



Personalised Interventions – What we know / what we don't know...



Number:

Holistic Needs Assessments (HNAs) completed:

2243 * Jan-Aug 2021

Number:

Personalised Care & Support Plans (PCSP) completed:

1040 * Jan-Aug 2021

HNA converted to PCSP:

46% of HNAs converted to PCSP

- Existing/current data reporting does not allow us to identify what percentage of the population is receiving personalised care interventions (our ambition is to address this to understand the % of population receiving these interventions)
- Target is 100% of people with a confirmed diagnosis of cancer

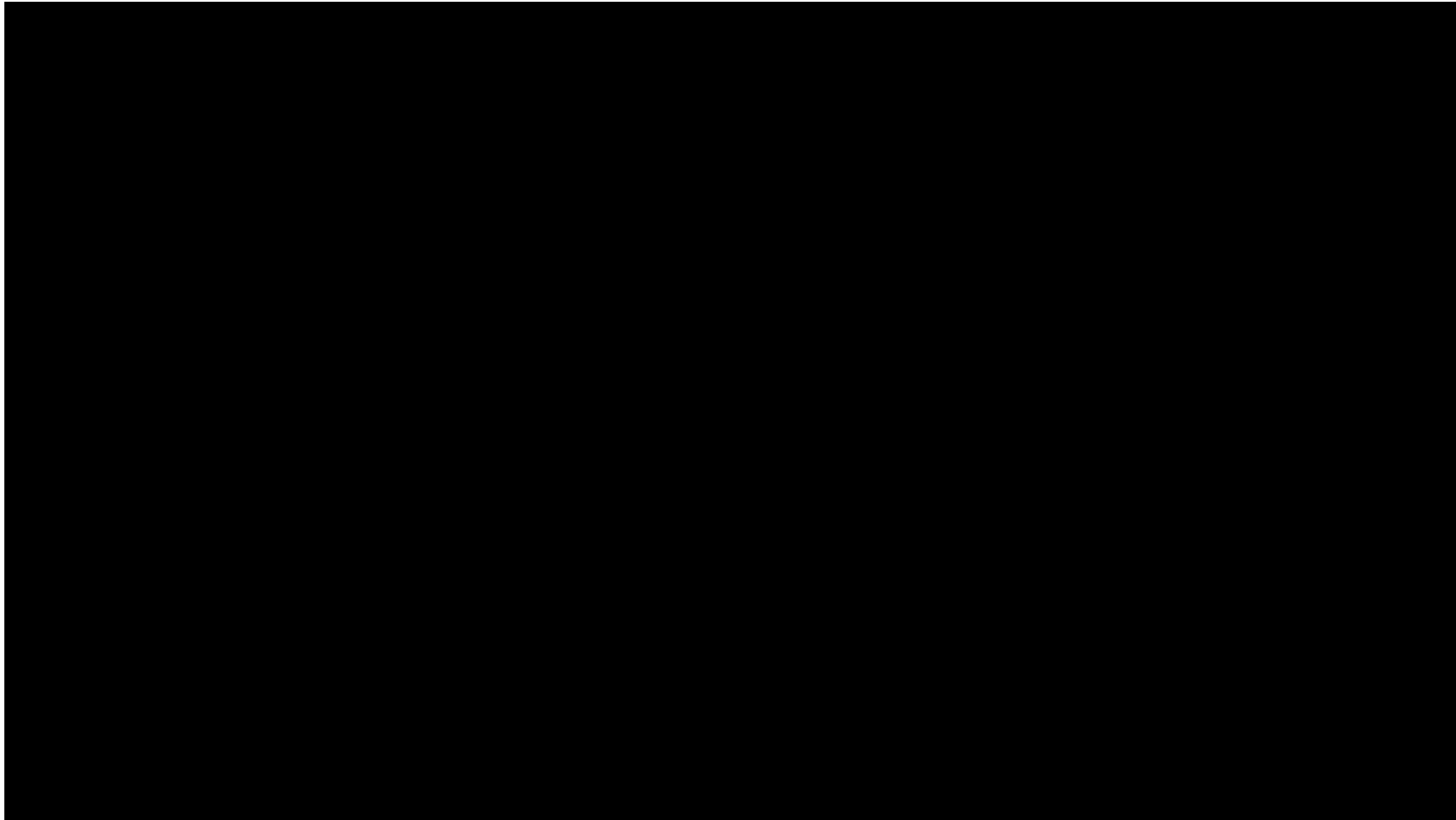
* Data taken from Somerset Cancer Registry/CancerStats reporting and HHFT data analysts – does not include University Hospitals Dorset

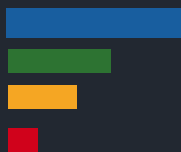


Personalised Interventions –
Introduction to Right by You:
Right place, right time, right people



This short animation provides a background to the Right by You project – an alternative film will be presented at the Board meeting.





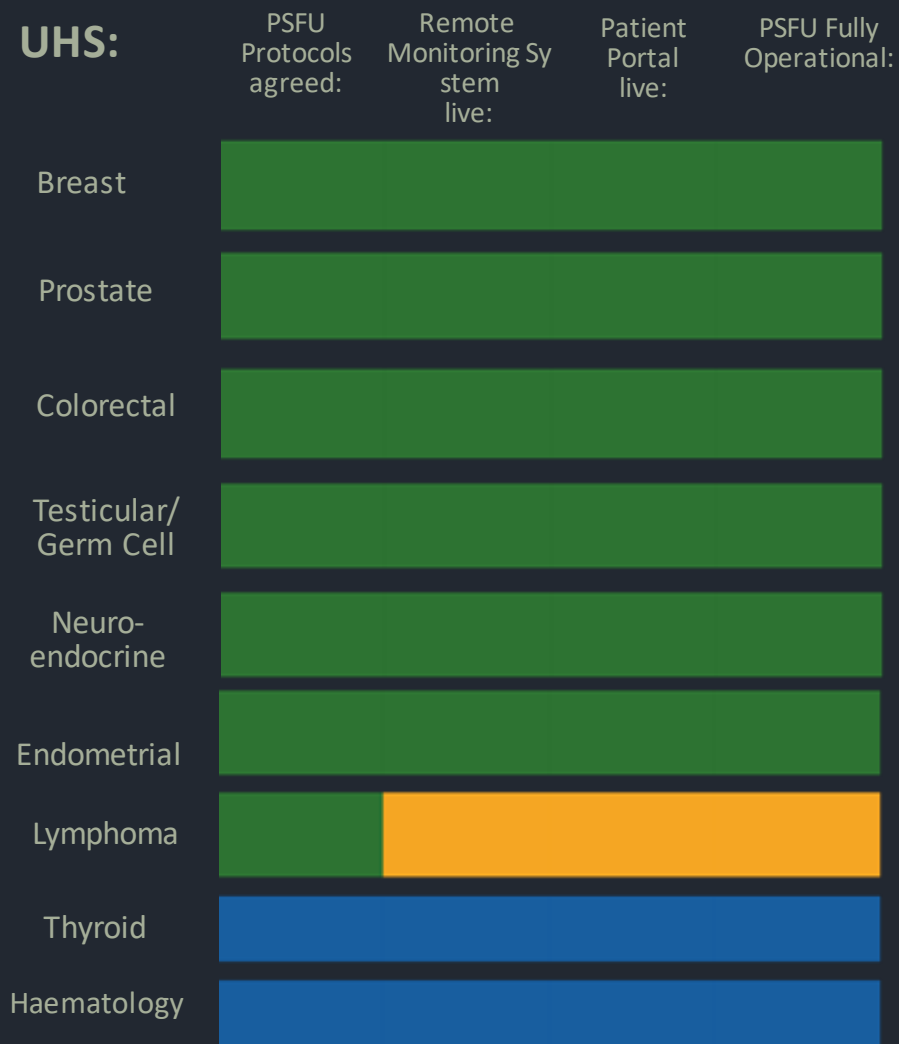
PSFU Progress Tracker

Hampshire & IOW

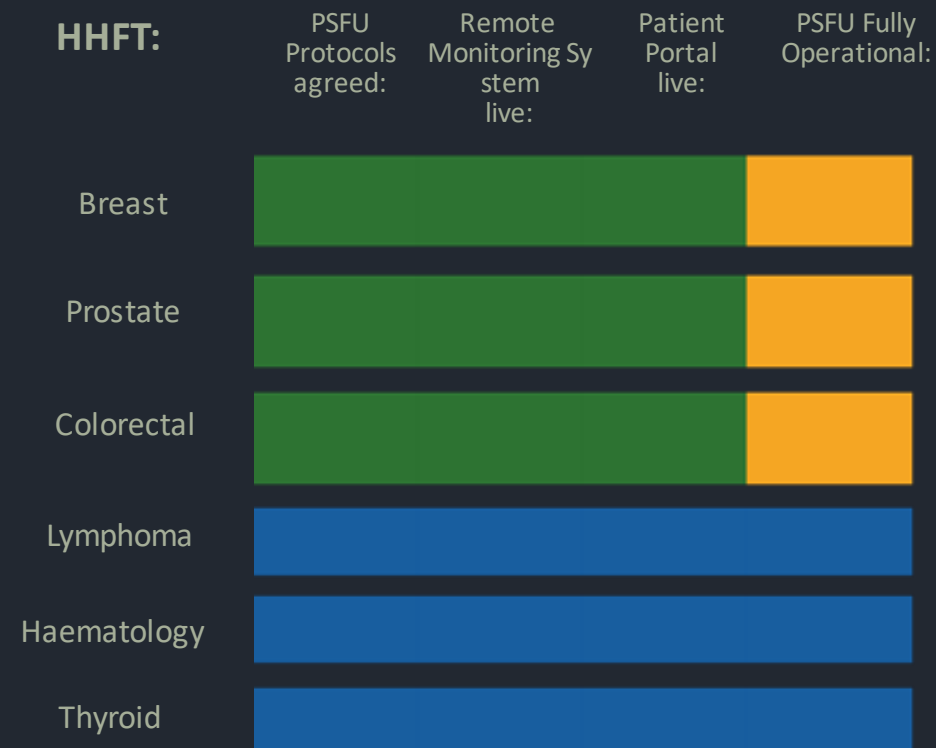
Q2 21/22



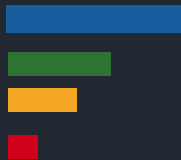
UHS:



HHFT:



Stage of progress: ● Complete ● In progress ● Behind schedule ● Due to commence



PSFU Progress Tracker Hampshire & IOW Q2 21/22



PHFT:

PSFU Protocols agreed: Remote Monitoring System live: Patient Portal live: PSFU Fully Operational:



IOW:

PSFU Protocols agreed: Remote Monitoring System live: Patient Portal live: PSFU Fully Operational:



Stage of progress:



Complete



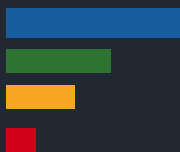
In progress



Behind schedule



Due to commence



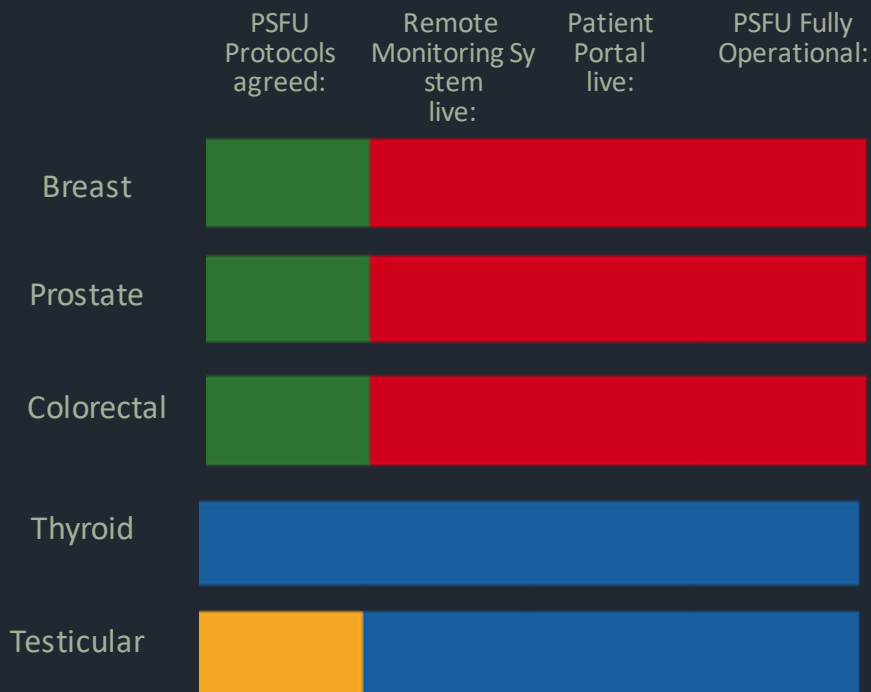
PSFU Progress Tracker

Dorset

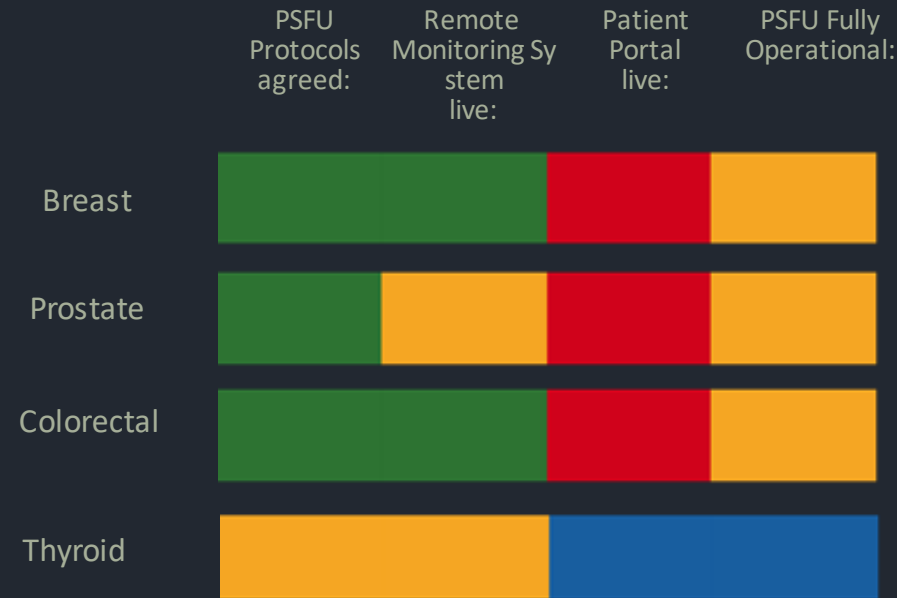
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UHD:



DCH:



Stage of progress: ● Complete ● In progress ● Behind schedule ● Due to commence

Top Risks & Mitigation:

Risks:

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Mitigation:

Significant inequity in patient support resources across the region (Patient portal)

No available timescale for any go-live date at UHD

IOW PAS integration into MMR

Under-utilisation of live pathways

- Dorset Care Record patient portal to go live in Dec 21
- Trust support required to progress digital enablers of PSFU/increase use of portals across pathway/increased ambitions for portal development

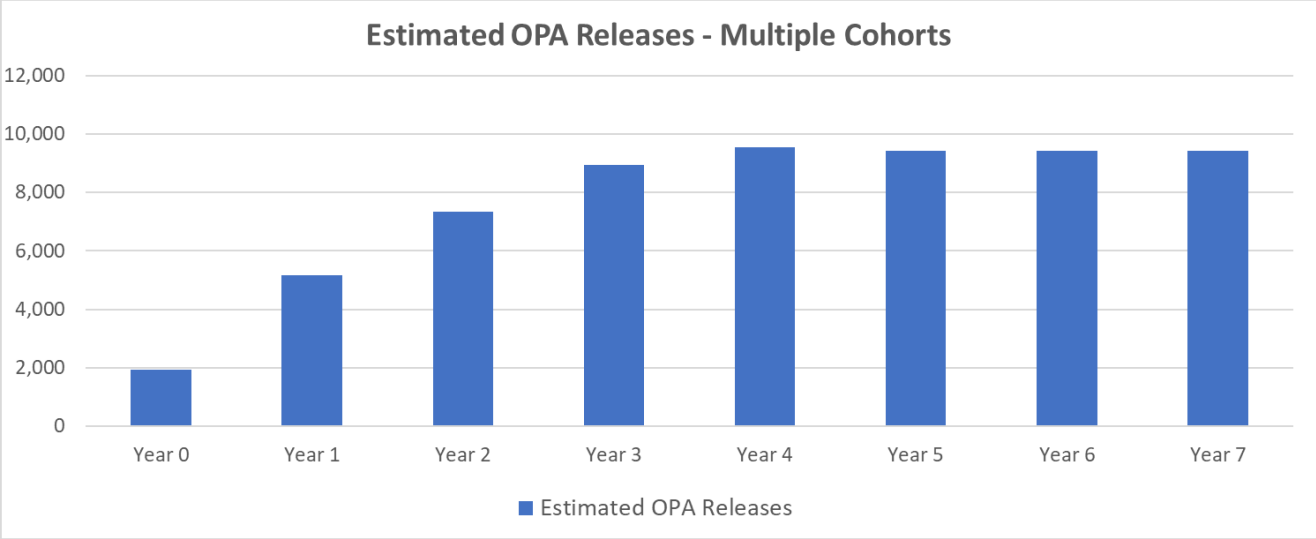
- Trust based support to prioritise IT resources and staff time for development – therefore enabling a go-live date across multiple pathways

- Monthly meetings with MMR team – work currently to resolve

- Template business case for PSFU/CSW role.
- Trust focused engagement to understand reasons
- Monthly reporting to track uptake
- Trust-based PSFU project lead funding



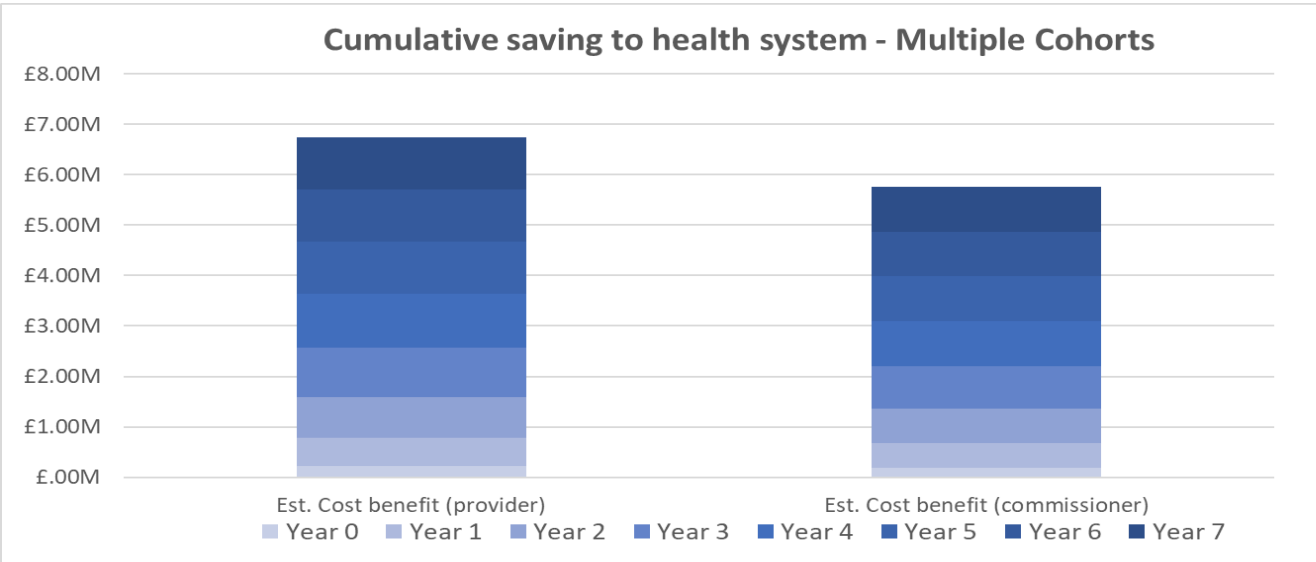
Personalised Stratified Follow Up – Realising the PSFU Potential



PSFU potential in Breast, Prostate and Colorectal across Wessex has not yet been realised.

Breast, Prostate and Colorectal PSFU estimated savings over 7 years across Wessex:

- Reduction in Outpatient Attendances = **estimated 61,161 appointments saved/repurposed**
- **Estimated Provider cost savings = £6,748,097**



With the right infrastructure PSFU pathways are safe, enabling and effective.

For providers the impact of PSFU spans across the service pathway supporting outpatient recovery/releasing staff for wider pathway support.

Increased PSFU pathways = increased savings



Conclusions:



- Requires system-wide approach and buy-in to support culture/behaviour change
- Progress is being made in PSFU and there is significant appetite to develop new pathways
- Support required at Trust level to progress key initiatives to provide quality and equity of service user experience (e.g. influencing clinical buy-in and prioritisation of Digital enablers – Remote monitoring systems/patient portals)
- Impacts of personalised approached will benefit all patients throughout their cancer journey

