

POLICY UPDATE

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CANCER SUPPORT

August 2014

Welcome to 'Policy Update', a monthly bulletin on the latest policy developments of relevance to those with an interest in cancer.

If you are reading this document on screen, the web addresses are hyperlinks which will take you directly to the relevant web pages or documents. If you would like any further information or have any questions or comments about 'Policy Update', please contact Keyan Salarkia, Assistant Policy Analyst, on 020 7840 2452 or email ksalarkia@macmillan.org.uk

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UK-wide

Overweight and obesity linked to 10 common cancers and over 12,000 cases every year in the UK

The largest study of its kind on BMI and cancer, involving more than 5 million adults in the UK, published in The Lancet shows a higher body mass index (BMI) increases the risk of developing 10 of the most common cancers,

UK researchers at the London School of Hygiene & Tropical Medicine and the Farr Institute of Health Informatics estimate that over 12 000 cases of these 10 cancers each year are attributable to being overweight or obese, and calculate that if average BMI in the population continues to increase, there could be over 3500 extra cancers every year as a result.

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UK to become world leader in genetic cancer and rare diseases research

The UK is set to become the world leader in ground-breaking genetic research into cancer and rare diseases, which will transform how diseases are diagnosed and treated, thanks to £300million of investment, announced by the Prime Minister.

The four year project will allow scientists to do pioneering new research to decode 100,000 human genomes – a patient's personal DNA code. The landmark project is on a scale not seen anywhere else in the world and is part of the Prime Minister's commitment to ensure the NHS as well as the UK's research and life science sector is at the forefront of global advances in modern medicine. Sequencing the genome of a person with cancer or someone with a rare disease will help scientists and doctors understand how disease works.

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England

Patients to benefit from 'Accessible Information Standard'

NHS England will be consulting on improving access to information formats such as 'easy read' and braille and to British Sign Language interpreters. Making sure hospitals, GP practices and other NHS and adult social service providers give people information in the best format for their needs, is the aim of NHS England's proposed new 'Accessible Information Standard'. It means all organisations will need to find out if a patient has extra

communication needs because of a disability or sensory loss, and take steps to meet those needs.

Over winter 1,200 people shared their experiences and opinions in an engagement exercise to inform the draft standard, and people can now read the consultation document and give their views on what it includes.

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More needs to be done on patient choice according to new survey

A survey conducted for NHS England and the health regulator Monitor published this week looked at the number of patients being offered a choice by their GPs between hospital or clinic outpatient appointments. The survey, in which over 2,700 patients were consulted, found that more than half of patients (51 per cent) were aware of their legal right to choose a hospital or clinic for an outpatient appointment, and a similar proportion (53 per cent) referred for an outpatient appointment first had a discussion with their GP about where to receive treatment.

Fewer than two fifths of patients, however, said they were offered a choice of hospital by their GP when being referred for an outpatient appointment. The survey also found that certain demographics were more likely to have discussed their choice than others.

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Pressure grows on Roche to lower Kadcylla price

Leading cancer charities have joined NICE in calling on Roche to lower the price for its advanced breast cancer drug Kadcylla (trastuzumab emtansine).

NICE applied its flexibility for assessing the cost-effectiveness of end-of-life cancer drugs, but concluded in final draft guidance that the high price of the treatment is still unaffordable for use on the NHS. Currently, the drug is being funded at its full list price of more than £90,000 per patient via the government's Cancer Drugs Fund.

The drug has been shown to extend overall survival by around 5.8 months when compared with treatment with lapatinib and capecitabine.

It is estimated that around 1,500 women in Britain could benefit from the drug every year.

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Summary Care Records hit 40 million milestone

A milestone 40 million patients now have a Summary Care Record and health professionals are using them to improve and speed up patient care every 30 seconds. NHS England is now focusing on rolling it out in A&E, NHS 111, and GP out-of-hours

services. Usage of the SCR is up with clinicians viewing them more than 19,000 times a week or once every 30 seconds.

The Summary Care Record (SCR) is an electronic record containing information about patients including allergies, medications and adverse reactions. It is pulled from GP systems which can be viewed by health professionals involved in a patient's care.

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Update to NHS constitution

The NHS constitution, which sets out rights for patients, public and staff, has been updated. It outlines NHS commitments to patients and staff, and the responsibilities that the public, patients and staff owe to one another to ensure that the NHS operates fairly and effectively. All NHS bodies and private and third sector providers supplying NHS services are required by law to take account of this constitution in their decisions and actions.

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Sir Bruce Keogh outlines 7-day service as his priority

Sir Bruce Keogh has said this month that the provision of 7-day services across the NHS is his "number one priority". Speaking at an NHS Improving Quality event in London, "Delivering Services, Seven Days A Week", NHS England's national clinical director told delegates: "We all know in our heart of hearts the service we offer at weekends isn't as good, and we have to tackle that and do the right thing."

Representatives of the 13 Early Adopter communities set up as part of the 7-Day Service Improvement Programme shared how they are improving access to high quality services on every day of the week. Delegates were given an insight into their work and able to share and learn from improvements.

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NHS must change to support care planning for long term conditions.

The Department of Health has published an assessment of the performance of NHS England. The Secretary of State for Health's assessment report covers the extent to which NHS England met its mandate and business plan objectives, and fulfilled its duties to improve the quality of services, reduce inequalities and secure public involvement.

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Northern Ireland

Minimum care standards for independent healthcare establishments

Health and Social Services Minister Edwin Poots has launched minimum care standards for independent healthcare establishments which set out the minimum requirements that independent healthcare facilities must achieve. They also set the level of service that the patients and clients using them can expect.

Mr Poots said: “These standards mean that every patient or client who uses an independent healthcare provider registered with RQIA will be assured of the minimum level of care they can expect to receive whether they access independent services privately or are referred through the Health and Social Care.”

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Scotland

GPs agree to long-term boost for primary care

GPs in Scotland have agreed a long-term package of measures that should bring greater stability and financial security to general practice. The agreement signals the end of annual contract negotiations in Scotland in the short term. Annual negotiations meant that practices had to adapt to changes every year. It also contains a commitment for the BMA and the Scottish government to work towards GMS contract arrangements reflecting shared priorities, to be implemented from April 2017. The idea is that both the government and the BMA will have more time to consider and develop these areas during a time of contract stability.

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Virtual Dashboards improve patient care

Health Secretary Alex Neil has hailed the “outstanding innovation in quality control” for patients at the Golden Jubilee National Hospital as he was given a demonstration of new Dashboard displays. The interactive displays - which feature graphics on hospital performance in vital areas, including patient care, cleanliness and efficiency - are fitted in public areas and readily accessible throughout the Golden Jubilee, giving patients and staff updates on how the hospital is meeting its targets.

Health Secretary Alex Neil said, “The Golden Jubilee has an outstanding track record of innovation and the Dashboards are another excellent example of the hospital driving

forward safe, effective care that is focused on the needs of patients, and I'm keen to see this approach to increasing openness and transparency replicated across Scotland.”.

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Additional £5million to improve patient flow

Health Secretary Alex Neil has announced an additional £5 million to help health boards to improve the flow of patients through the health and social care services.

The funding boost will aid further development of intermediate care, helping people to stay in their own home instead of going into hospital in the first place, and services that support people to regain their independence so they can return home sooner after a hospital stay.

By improving the way that patients move through hospital and are supported at home, the investment will allow people to be moved from A&E to an appropriate ward sooner and reduce the amount of unnecessary time that patients spend in hospital.

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More Scots detecting cancer early

The number of cancers detected at the earliest possible stage, when it is easier to treat and there is a better chance of a survival, has risen in Scotland.

Figures released by ISD Scotland show that 24.3 per cent of all breast, lung and bowel cancers in Scotland during 2012 and 2013 were detected at stage one - an increase of 4.7 per cent since 2010 and 2011. The increase in early detection is against a backdrop of a continued increase in cancer cases across the country with around 30,000 people diagnosed with cancer in 2011.

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Wales

Dr Peter Lewis appointed to develop planned care in Wales

Health Minister Mark Drakeford has appointed Mr Peter Lewis, a Consultant Vascular Surgeon at the Aneurin Bevan Health Board, to lead the future development of planned care in the Welsh NHS. As National Clinical Lead for Planned Care, Mr Lewis will work with the Welsh Government and NHS Wales to take forward planned care and the co-ordination of primary and hospital services to ensure a safe system of care.

To aid the development of planned care, the Minister has also confirmed how £3.4m of the £4m announced earlier this year to improve waiting times for diagnostic tests is being allocated. It will help reduce waits for tests such as MRI scans, CT scans, Ultrasound scans and Endoscopies. The remaining amount will be allocated later in the year.

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'Primary Care in Wales: Rapid Review of Models and Policies' report published

The 'Primary Care in Wales: Rapid Review of Models and Policies' report, which is based on a rapid review of international models of primary care provision and primary care policy, was published on 25 July to support Health Boards, the Welsh Government and all stakeholders in their strategies for health system change.

The report also looks at emerging international consensus on primary care policy and also provides some case studies. It is intended to be a resource of ideas that can be adapted and used in Wales. One of the key recommendations from the report suggests using a change model that is suited to a large, complex system with a distributed leadership.

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