

# POLICY UPDATE

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CANCER SUPPORT

## December 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](mailto:ksalarkia@macmillan.org.uk)

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# England

## **Simon Stevens responds to new investment from treasury**

In response to the Treasury's announcement of £2bn additional funding for the NHS, made in this year's autumn statement, Simon Stevens welcomed new investment. The Chief Executive of the NHS said, "we know times are tight, but the economy is now growing. Sustaining a high quality health service in the years ahead will therefore require both challenging new efficiencies and genuine new investment. That's the case I've been making on behalf of the NHS to government, and today they've listened and responded with the funding we need for next year to sustain frontline NHS services and kick-start transformation. Of course there will still be pressures and difficult choices, but the government has played its part and the NHS will step up and play our part too. Today represents an extremely welcome vote-of-confidence in the NHS' own five year plan."

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## **New plans on paying for a better and more responsive NHS.**

NHS England and Monitor have published plans describing radical changes to how healthcare is paid for, which will enable the NHS to introduce new models of care.

This would enable the NHS to put into practice its long-standing commitment to better integrate hospital, community and mental health care, and provide a payment system to help introduce the examples of care models outlined in the Five Year Forward View.

Monitor and NHS England are encouraging commissioners and providers to adopt this new payment model when negotiating the local price-setting arrangements. The organisations propose such arrangements should increasingly become the norm under reforms to the national tariff, which would see it become a framework of rules, rather than just a list of prices.

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## **Public Health Outcomes Framework 2013-2016 updated.**

The updated Public Health Outcomes Framework 2013-2016 has been published by the Department of Health. The new Framework that has been published is in three parts. Part 1 introduces the overarching vision for public health, the outcomes we want to achieve and the indicators that will help us understand how well we are improving and protecting health. Part 2 specifies all the technical details we can currently supply for each public health indicator and indicates where we will conduct further work to fully specify all indicators. Part 3 consists of the impact assessment and equalities impact assessment.

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## **21% of patients in England can now access their medical record online.**

As of September 2014, 21% of patients in England have been able to access their medical records online, a significant increase on 2% this time last year. The number of patients able to book their appointments and request repeat prescriptions has also jumped to 91% and 88% respectively.

NHS England's Patient Online programme team has been working with practices across England to ensure they have the support they need to confidently offer these online services. As well as a national network of implementation and clinical support services, practices continue to use the recently published, Patient Online Support and Resources Guide. This guide includes guidance and practice tools developed by the Royal College of GPs, as well as materials for patients, frequently asked questions, regional and local support arrangements and much more.

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## **National Cancer Strategy – 4<sup>th</sup> Annual Report.**

The Department of Health, NHS England, and Public Health England have published the national cancer strategy's 4<sup>th</sup> annual report. The main focus of the strategy for cancer was around improving cancer survival through earlier diagnosis of cancer and improved access to the best possible treatment. The latest report shows in the last year there has been significant progress on cancer screening and campaigns, further support for GPs in referring patients appropriately, ensuring better access for all to the best possible treatment, and further improvements in many of the responses to the questions in the Cancer Patient. However it recognises there is more to do particularly around rarer cancers, prevention, and work to build on screening and access to treatment.

The report also highlights the need for continuing action on inequalities in access and outcomes for cancer patients.

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## **Public to shape how NICE balances fairness with efficiency.**

NICE's Citizens Council, which is a group of members of the public that provides input into NICE's work has recommended that 'Dignity, collective responsibility, and safeguarding the vulnerable are among the values that should be considered when making decisions about how resources should be spent both fairly and efficiently.'

Earlier this year, the Citizens Council met to discuss the societal values important for making decisions that balance efficiency and equity. This led to the Council developing a list of key societal values that NICE should consider across its public health, social care and health care programmes.

The list of key societal values to be considered across all three NICE programmes are: accountability; collective responsibility; dignity; education; fairness; honesty; humanity; individual rights; justice; maximising total benefit/benefit for most/utilitarianism; quality of

life; respect; right to health and welfare for all; safeguarding the vulnerable; and, value/quality of service.

NICE will now use the Council's findings to update its Social Value Judgements document, which outlines the principles for the development of NICE guidance.

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## **Proposals to make private vehicles smokefree when carrying children.**

The government has announced it will lay regulations to end smoking in private vehicles carrying children as it published the report of a public consultation.

This report provides an overview of the 201 responses received and a summary of the main themes that emerged in response to the specific questions asked in the consultation document. It also sets out how we will amend the draft regulations to reflect the information gathered during the consultation. Subject to parliamentary approval, we anticipate the new regulations will come into force on 1 October 2015.

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## **HSJ announces Top 100 influential people in health.**

The Health Service Journal (HSJ) has published its top 100 influential people in health. Simon Stevens, Chief Executive of the NHS, tops the list ahead of Health Secretary Jeremy Hunt in second, Jeremy Heywood in third, Bruce Keogh in fourth, and Shadow Health Secretary Andy Burnham in fifth.

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# **Scotland**

## **Record number of NHS staff in Scotland.**

The number of staff working in Scotland's NHS has risen to a record high, figures show. The figures, released by ISD Scotland, show that under the current government the NHS Scotland workforce has increased by 7.6 per cent, with over 9,600 more whole time equivalent (WTE) staff.

NHS consultant numbers are at a record level, with a 36.8 per cent increase and over 1,300 more WTE consultants since 2006. Figures show that the number of qualified nurses and midwives has also increased by 3.9 per cent under this government, while the number of Allied Health Professionals has increased by more than 240 WTE in the last year alone.

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## **NHS Scotland Chief Executive publishes Annual Report.**

The Chief Executive of NHS Scotland, Paul Gray, has published his annual report, looking at how the NHS performed during 2013/14. The report reflects the significant achievements of NHS Scotland in the last year, whilst outlining the challenges that the health service continues to face.

Speaking following publication of the report, Mr Gray said he was proud of the contribution that the 150,000 people who work in the NHS had made to patient care across Scotland. Mr Gray also focused on the range of activity over the last few years to make hospitals, and other health care settings, safer for patients.

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## **Cancer Waiting Times Improve.**

Health Secretary Shona Robison has welcomed an improvement in waiting times for cancer treatment, but said that more must be done to meet targets. Between July and September of 2014, 96.7 per cent of patients began their cancer treatment within the national standard of 31 days from a decision to treat - with the median wait being 6 days.

In the same period, 93.5 per cent of patients referred with a suspicion of cancer began treatment within 62 days - an improvement on 92.9 per cent in the previous quarter. Earlier this year a support team was put in place by the Scottish Government to provide targeted help for health boards across Scotland to improve waiting times for cancer treatment, with results now starting to show.

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# **Northern Ireland**

## **Wells launches Quality 2020 Leadership Attributes Framework.**

Health, Social Services and Public Safety Minister Jim Wells has launched the Quality 2020 Leadership Attributes Framework. The Framework is part of the Quality Strategy 2020 (Q2020), which is a 10 year strategy designed to protect and improve quality in health and social care in Northern Ireland.

The Leadership Attributes Framework specifies the attributes including knowledge, skills and behaviours that leaders in Health and Social Care are expected to acquire. The Framework provides an organised system to enable those who have already developed the attributes, to maintain and to develop the highest levels of leadership behaviours.

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