

# POLICY UPDATE

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CANCER SUPPORT

## June 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 Anna Baranski, Policy Analyst, on 020 7091 2452 or email [ksalarkia@macmillan.org.uk](mailto:ksalarkia@macmillan.org.uk)

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# England

## **Simon Stevens introduces his ideas as new NHS England Chief Executive.**

Across his first interviews and speeches as Chief Executive of NHS England, Simon Stevens has spoken of the need to reinvent our definition of a hospital, outlined his position on the concentration of specialist services, and discussed the role of the NHS as principal provider of services, among other topics.

Speaking to *HSJ* he said the commissioner-provider split could change, that CCGs would need to “prove themselves” but that he wanted to give them “every chance to succeed”, and he would take a “pragmatic” view of competition in the NHS. Stevens also took the opportunity to distance himself from the organisation’s previously stated ambition to concentrate specialised services in “15-30 centres of excellence”

Among other topics, Stevens emphasised the need of patient choice, saying “Wherever possible, should patients’ choices determine where services and how services are provided? I think that’s what the NHS constitution says. Some of those rights are longstanding. “Wherever possible, allowing patients to make those kinds of choices is desirable. Mr Stevens has also said the NHS must stop closing cottage-style hospitals and return to treating more patients in their local communities in a marked reversal of current policy. According to Stevens the NHS must expand its local services because too many patients are being robbed of “dignity and compassion”.

Mr Stevens warned that British hospitals have become among the worst in western Europe at caring for local populations, because too many services have been stripped out and centralised. He said Britain must learn from countries such as Sweden, the Netherlands and the United States, which have pioneered ways of bolstering community care around small hospitals to meet the needs of their populations.

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## **Monitor shows NHS trusts acting to tackle failures of care.**

A new report from Monitor shows NHS foundation trusts are acting to tackle the failures of care highlighted by the Francis report and Keogh review. The report confirmed that NHS foundation trusts hired an additional 24,000 members of staff last year, 3 times what was planned, in order to upgrade the quality of services to patients. The majority of new staff were nurses, healthcare assistants and others supporting frontline services.

Overall, the 147 NHS foundation trusts (which make-up two-thirds of all NHS trusts) met national performance standards for the majority of operational targets tracked by Monitor over the course of 2013/14, and finished the year in financial surplus.

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## **NHS and England and the GovLab launch report on potential of Open Data in Health and Social care.**

NHS England and the GovLab have launched a blueprint – The Open Data Era in health and social care report – for accelerating the use of open data in health and care settings. The availability of open data can empower citizens and help care providers, patients and researchers make better decisions, spur new innovations and identify efficiencies.

The report was commissioned by NHS England and written by GovLab, part of New York University and world leaders in the field of open data usage. It puts forward a proposal for how the health and care system can maximise the impact of sharing open data through establishing priorities and clear ways of measuring benefits.

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## **Public Health Outcomes Framework Update published.**

The Department of Health has published the annual update of the 2013-2016 Public Health Outcomes Framework. Full detail of the updates and outputs, interim reports and corrections to previous documents have been published. The framework concentrates on increased healthy life expectancy, reduced differences in life expectancy, and healthy life expectancy between communities.

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## **Government announces Care Bill Implementation Grant.**

Government has announced the availability of the The Care Bill implementation grant. The grant, which totals £19,000,000, is a new and one off grant that the Department of Health is making available to support local authorities to implement the Care Bill, now Care Act, during May 2014 to 2015.

The grant determination is accompanied by an agreement which explains what the Department of Health expects from recipient local authorities.

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## **Use of Health and Social Care by people living with cancer tracked.**

The Nuffield trust has carried out a study and published a report – *Use of health and social care by people with cancer*. Using primary care, social care, and cancer registry data, the report was able to track the patterns of service use across health and social care in the year after people were diagnosed with cancer.

The findings show clear evidence of a social services response to a person being diagnosed with cancer. The research found that 10 per cent of people received a local

authority social care assessment within three months of being diagnosed with cancer, compared with seven per cent receiving care in the year before diagnosis.

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## **Head of NHS Confederation wants change driven by ambition, not fear.**

The head of the NHS Confederation has called on health and care leaders to use “this watershed year for the NHS” to step away from the “burning platform approach” to delivering the essential changes needed in the health service.

In his speech to delegates at the NHS Confederation’s 2014 conference and exhibition in Liverpool, NHS Confederation chief executive Rob Webster said that for too long NHS reform has been driven by a desire to avoid disaster situations, a ‘burning platform’ of overstretched services, long waits, and financial failure.

He said the fear-driven approach to change does not motivate improvement, and that it is time the health service sets a new tone for change, which creates a burning ambition for reform and improvement, and allows hope to flourish.

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## **NHS England launches Medicines Optimisation Prototype Dashboard**

NHS England has launched the Medicines Optimisation Prototype Dashboard, designed to encourage CCGs and trusts to think more about how well their patients are supported to use medicine and less about focusing on cost and volume of drugs. The prototype dashboard brings together data in one place and includes hospital admission data and patient experience indicators and looks at areas such as medication safety and utilisation of community pharmacy services.

Medicines play a crucial role in maintaining health, preventing illness, managing chronic conditions and curing disease. Up to 50% of medicines are not taken as intended and between five and eight per cent of all unplanned hospital admissions are due to medication issues. This figure rises to 17% in the over 65s age group.

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## **Expert Advisory Group makes recommendations to NHS Constitution**

The Expert Advisory Group to the NHS Constitution has made 10 recommendations to increase the impact of the NHS Constitution. The report recommends several ways to bring the NHS Constitution to life and ensure it is a practical tool for patients including - a national awareness campaign funded by the Department of Health and NHS England; easy-to-read versions of the NHS Constitution to make it more accessible for patients; a

guide to complaints and feedback to sit alongside the NHS Constitution; monitoring the extent to which patients' and staff's rights and pledges are being met by NHS providers.

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### **Department for Work & Pensions publishes *Fuller Working Lives: a framework for action*.**

Published this week, 'Fuller Working Lives: a framework for action' explains how working longer can benefit individuals, businesses, society and the economy. It sets out a number of new actions the Department for Work & Pensions will take to help people have fuller working lives.

According to the report, 'this is not simply about people working after State Pension age, though some individuals may want to and this may be right for them. We want to stop people leaving the labour market involuntarily in their 50s and early 60s. This can be catastrophic for an individual's retirement finances and can also negatively affect their wider health and wellbeing.' The framework covers the main groups affected – carers, disabled people and those with health conditions, people who are made redundant.

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### **The King's fund publishes its report on reforming the NHS from within.**

The King's Fund has published its report, Reforming the NHS from within: beyond hierarchy, inspection, and markets. The paper reviews the impact of approaches to NHS reform in England since the late 1990s, and argues for a fundamental shift in how the NHS is reformed.

The report presents some key findings including: transforming the NHS depends on engaging doctors, nurses and other staff in improvement programmes; a new settlement is needed to avoid frequent shifts of direction that create barriers to transformational change; improvement in NHS organisations needs to be based on commitment rather than compliance; and, leadership in NHS organisations needs to be collective and distributed, with skilled clinical leaders working alongside experienced managers.

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## **Northern Ireland**

### **Poots welcomes Access to GP Practices Report.**

Health Minister Edwin Poots has welcomed the publication of the Patient and Client Council's 'Access to GP Practices Report'. The aim of the report was to gather the experiences from people

in relation to accessing GP services, looking at their views on opening times, the reception area and staff, making an appointment right through to seeing their GP and other healthcare professionals such as Practice or Treatment Room Nurse.

Speaking about the report, the Minister said: "I fully appreciate the commitment and contribution of General Practice in the delivery of healthcare and I recognise that GPs are a key component of the vision in Transforming Your Care. It is encouraging to note from the Access to GP Practice Services report that the majority of people (73%) who took part in this project indicated that overall they were satisfied; with almost 32% stating they were very satisfied with access to their GP.

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## **Cancer information and awareness for the Lithuanian population in Northern Ireland**

Speaking at the launch of 'Together We Can', a project aimed at providing cancer information and awareness for the Lithuanian population in Northern Ireland, Minister Poots said: "I am pleased to learn that Northern Ireland is the first UK country to take this project forward. The initial focus of the project is about the language challenges in increasing awareness of cancer in each of our respective health and social care systems".

The project is a joint effort between Northern Ireland and Lithuania and will research, design, develop and market a wide range of Lithuanian/English leaflets on a variety of cancer specific information, including support and sign-posting early detection, prevention and cancer awareness. The work being undertaken by the two countries will help people to better understand the challenges of cancer, especially awareness of the signs and symptoms.

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## **Scotland**

### **Reduction in hospital mortality figures.**

A further reduction in hospital mortality figures is a signal of high standards in Scotland's NHS, according to Alex Neil.

Scottish Health Secretary Alex Neil has commented on the latest hospital mortality figures, which have shown a 14.2% reduction in hospital mortality under the Scottish Patient Safety Programme. A 6% rise in staffing levels, and the contribution of all staff has had an important role in the reduction according to Mr Neil.

[Click here for more information](#)

## **GP Link Worker Programme.**

A new pilot programme that places link workers in GP surgeries is tackling health inequalities in some of Scotland's most deprived communities. Under the programme, link workers are based in seven surgeries in low-income communities. It means GPs can refer patients if they have problems which go beyond the scope of medical treatment.

The link worker can then help people to deal with financial, emotional or environmental problems. Link workers can give people advice, or direct them to organisations and activities in the community, enabling them to cope more effectively and feel more supported in their communities. The scheme will be evaluated, with patient outcomes from the participating practices compared with eight practices outside the scheme. Ministers will then consider whether to roll it out further.

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## **Positive experience among majority of GP patients and social care users**

A survey of over 100,000 people has found that the majority of GP patients and social care users report a positive experience of their care. However, an overarching finding was that respondents were slightly less positive about GP and out of hours services than in the previous survey in 2011/12.

Results of the 2013/14 Health and Care Experience Survey were released by Scotland's Chief Statistician. The survey asked respondents to feed back their experiences of their GP practices and out of hours care. The survey also asked about experiences of social care services and asked specific questions of those with caring responsibilities.

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## **NHS Scotland launches innovation fund**

Scottish Health Secretary Alex Neil has launched an ambitious new national health & social care innovation fund, which aims to raise millions of pounds, to develop original and pioneering treatments for Scotland's patients.

Launching the fund, Mr Neil said it would promote current innovations within NHS Scotland and support the development of new ideas.

The Golden Jubilee National Hospital will work on behalf of the whole NHS in Scotland to raise funds from a variety of sources, including donations and European grants. The fund will not be used for mainstream services or research activities that are currently funded through existing routes. Instead, it will support initiatives that create and turn excellent ideas into services for patients.

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# Wales

## Patient satisfaction with hospital care in Wales.

A new survey has shown patient satisfaction with Hospital services in Wales. The annual Fundamentals of Care audit – the fourth such exercise – asks patients to rate the care they received on hospital wards in terms of being treated with dignity and respect, the cleanliness of the ward and other measures.

The report is based on a snapshot-in-time audit of more than 3,000 patient records, a patient survey and a staff survey carried out in October and November last year. The results show 94% of patients were satisfied with the overall care they received; 97% always or usually felt they were treated with dignity and respect; 98% agreed the clinical area was kept clean, tidy and uncluttered; 96% agreed they were given help to maintain their independence; and 93% agreed that when they asked for help they received it promptly.

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## Spending on cancer in Wales at an all time high.

The NHS in Wales is spending more than ever on cancer care, new figures released by the Welsh Government show. The figures, released as part of the annual publication of the NHS Expenditure Programme Budgets, show spending on cancer care by the Welsh NHS has reached a record high. The figures for 2012-13 show the total spend has increased from £356.8m in 2011-12 to £360.9m in 2012-13, and the spend per head of the population has increased from £116.44 in 2011-12 to £117.41 in 2012-13.

Health Minister Mark Drakeford said the investment is being made in clinically-effective cancer treatments, which have a proven evidence base. Wales has shown the biggest improvement in cancer survival among the four countries of the UK since devolution.

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## Welsh Government announces pilot to test new ways of measuring waiting times for cancer

A pilot project to test new ways of measuring cancer waiting times in Wales is underway, the Welsh Government has announced. A single cancer pathway will be piloted, measured and compared against the existing system. Currently, patients are placed on one of two pathways – a 62-day ‘urgent’ pathway or 31-day ‘non-urgent’ pathway, according to when their cancer was first diagnosed.

The new measures, which have been developed by cancer clinicians, will be tested in six health board areas in Wales and will help the NHS to gain a more accurate picture of actual waiting times and speed up treatment in many cases.

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## **Social Services and Well-being (Wales) Act 2014 will give carers equal rights to those they care for.**

Carers in Wales will have equal legal rights to those they look after when a landmark Welsh law comes into force in April 2016, the Deputy Minister for Social Services, Gwenda Thomas has announced during Carers Week. There are estimated to be more than 370,000 carers in Wales, 90,000 of whom look after family and friends for at least 50 hours a week. Between 70% and 95% of the care provided to people in communities across Wales is given freely by family and friends.

The Social Services and Well-being (Wales) Act 2014, which gained Royal Assent in May, will transform the way in which social services are delivered through a focus on achieving results that are necessary to promote the welfare of the person - as an individual, as a family and as part of a community.

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## **New Chief Executive of NHS Wales takes up post.**

Dr Andrew Goodall has taken up his post as chief executive of the NHS in Wales, after five years as chief executive of [Welsh NHS Confederation](#) member organisation, Aneurin Bevan University Health Board.

Dr Goodall has worked for the NHS for 23 years. During this time, he has worked in a number of planning and operational positions across South Wales. He has been an NHS chief executive for nine years, taking up the role in Aneurin Bevan University Health Board in June 2009.

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## **“Prudent healthcare needs prudent patients” – Mark Drakeford**

Speaking at the NHS Confederation's annual conference in Liverpool Welsh Health Minister Mark Drakeford said that the role of the Welsh Government is to create the right conditions for people to live full and healthy lives.

He said it is the responsibility of all people is to take advantage of those conditions and take custodianship of their own health, instead of handing it over to the NHS.

Professor Drakeford said that although the NHS remains free at the point of use – as Aneurin Bevan intended – it is not free of obligation. The Welsh Government's recently published Public Health White Paper seeks to support people to live healthier lives and prevent harm with through a number of proposals.

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