

# POLICY UPDATE

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CANCER SUPPORT

## September 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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## UK-wide

### UK Proton Beam Centres to open in 2018.

NHS experts have announced that proton beam therapy to treat children with brain cancer will be available in the UK by 2018. Dr Adrian Crellin, of NHS England, said clinics in Manchester and London would treat their first patients in 2018.

However, doctors have warned that each case will need to be considered on individual merit, as factors determining whether proton beam therapy offers advantages over traditional radiotherapy are complex. The main benefit of proton treatment is its ability to allow more targeted radiation to tumours while minimising harmful radiation to surrounding healthy tissues. For certain childhood tumours it is thought the therapy offers some hope of reducing long-term side effects of radiation.

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### Patients to benefit from ‘Accessible Information Standard’

Three-quarters of cancer patients who are clinically depressed do not get the psychological therapy they need, according to research in the Lancet. This “huge unmet need” is partly due to a focus on physical symptoms at the expense of good mental healthcare, researchers say. Macmillan has said the current situation is “heartbreaking”.

Sufferers of major depression feel persistently low, may find it difficult to sleep and have poor appetites. Scientists say a new nurse-led approach designed specifically for patients with cancer can substantially reduce depressive symptoms. In their study of about 500 patients, the therapy halved the depression scores of more than 60%. Patients reported they were less anxious, less fatigued and experienced less pain. Only 17% of those who had standard NHS care had similar results.

Researchers argue that if their programme were rolled out widely it could improve the quality of life for thousands of people. Their final papers suggests the therapy improves quality of life, regardless of how good a patient’s prognosis is.

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# England

## **BMA brands freeze in funding for Public Health in England as 'inadequate'.**

The BMA has branded a freeze in funding for public health in England as 'inadequate'. The government has announced that local authorities' funding allocations will remain at their current level, £2.79bn, for 2015/16, although a new £5m HPIS (health premium incentive scheme) will be introduced.

BMA public health committee co-chair Penelope Toff, said the BMA had lobbied for a 'substantial and much-needed funding increase for public health' for a number of years, and she warned that inadequate local authority funding could put crucial public health services such as school nurses and health visiting at risk.

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## **'A New Settlement for Health and Social Care', final report published.**

The King's Fund have published their final report from the independent Commission on the Future of Health and Social Care in England. In it, the commission discusses the need for a new settlement for health and social care to provide a simpler pathway through the current maze of entitlements.

The commission, chaired by Kate Barker, proposes a new approach that redesigns care around individual needs regardless of diagnosis, with a graduated increase in support as needs rise, particularly towards the end of life. The commission has concluded that this vision for a health and care system fit for the 21st century is affordable and sustainable if a phased approach is taken and hard choices are taken about taxation.

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## **NHS and Social Care bodies take step towards integrated health and social care for individuals.**

NHS England, the Local Government Association, Think Local Act Personal and the Association of Directors of Adult Social Services have formally invite health and social care leaders to help build a new integrated and personalised commissioning approach for people with complex needs.

Integrated Personal Commissioning is a new voluntary approach to joining up health and social care for people with complex needs. This proposal makes a triple offer to service users, local commissioners and the voluntary sector to bring health and social care spend together at the level of the individual.

Service users will be offered power and improved support to shape care that is meaningful to them. Local authorities and NHS commissioners, and providers will be offered dedicated technical support, coupled with regulatory and financial flexibilities to enable integration. The voluntary sector will be a key partner in designing effective approaches, supporting individuals and driving cultural change.

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## **Jeremy Hunt announces cash injection for clinical trials for cancer.**

Health Secretary Jeremy Hunt has announced a £6m cash injection for cancer treatment. The investment will be used to fund clinical trials over the next five years for a specialist new radiotherapy, as Hunt reiterated the government's pledge to "aim high" to beat the disease.

Other measures announced include cooperation between Cancer Research UK and Macmillan to support GPs in ensuring quick cancer diagnoses. Hunt said a quarter of cancer patients were diagnosed in emergency circumstances, when symptoms were at an advanced stage. Macmillan will also work with survivors under new plans from NHS England to promote physical activity to help with recovery.

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## **National Cancer Intelligence Network publishes 1 year survival report.**

The National Cancer Intelligence Network has published a report which describes the 1 year survival analysis for patients in England first diagnosed in 2012. It presented a brief summary of the main variation in 1-year relative survival of the selected cancer types by stage, sex, age, and socio-economic deprivation.

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## **£160 million boost to the Cancer Drugs Fund**

Health Secretary Jeremy Hunt has announced a £160m boost to the Cancer Drugs Fund, giving more patients access to innovative drugs not routinely available on the NHS. Two new drugs will now also be added to the Fund; enzalutamide for prostate cancer and lenalidomide for a group of patients with myelodysplastic syndrome, a rare blood condition.

Professor Peter Clark, Chair of the Cancer Drugs Fund (CDF), has written to NHS England Chief Executive Simon Stevens recommending CDF's panel of experts re-evaluate a number of drugs currently on the list, making evidence-based decisions about what will deliver greatest benefit to patients. NHS England has accepted and agreed these proposals. Copies of the letters are on the NHS England website.

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## **NHS Announces Five Year Forward View (5YFV).**

The NHS has announced its plans for their Five Year Forward View (5YFV). The Forward View will provide 'a clear vision; a shared understanding of the extent and nature of the gap between where we are and where we need to be; a range of care models that could deliver transformation; priority areas for targeting transformation; actions that we can take nationally to create the conditions for local action.'

The announcement of the 5YFV outlines predicted outcomes, as well as the work areas and processes involved. Further there is an invitation to provide any relevant comments, research, or contributions for consideration.

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## **Scotland**

### **Driving Down Patient Waiting Times.**

More than 91 per cent of patients in Scotland are being treated in 18 weeks or less, according to figures published this month.

The statistics published by ISD Scotland show a more than 1 per cent rise from December 2013, demonstrating continued achievement of the Scottish Government target.

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### **Transforming Surgical Care for Prostate Cancer.**

Scottish patients will soon be able to benefit from state-of-the-art robotic surgery, which will improve their quality of life following surgery. The Scottish Government is investing up to £1 million to complement the fundraising efforts of UCAN, the urological cancer charity in the North of Scotland, to purchase a robot that surgeons use to perform minimally invasive surgery – initially for prostate cancer.

Scotland's first Robotic-Assisted Surgical System (RASS) will operate from two new state-of-the-art theatres at Aberdeen Royal Infirmary, with the first patient expected to benefit from the advanced surgical techniques early next year. This is the start of a process to deliver nationwide robotically assisted surgery and the Scottish Government will continue to work closely with boards and cancer charities to strategically plan who best to deliver these services across Scotland.

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## **Improving Safety for NHS Scotland.**

The quality of care offered in Scotland's NHS will be subject to additional new reviews in a bid to continue driving up standards and improving outcomes for patients. The new independent reviews, led by Healthcare Improvement Scotland (HIS), are part of the Scottish Government's commitment to build a safer and more effective health service. The rolling reviews will be focussed on improving care, building on the high standards already delivered every day by the NHS. They will complement the current joint inspections of care for older adults carried out by HIS and the Care Inspectorate and the inspection of hospital cleanliness by the Healthcare Environment Inspectorate.

The expert review teams will be made up of health specialists and patients, who can use their personal experience of the NHS to inform the work. The teams will carry out inspections primarily focussed on the quality of care, but underneath that also looking at a range of issues including staff levels, patient and staff experience.

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## **Wales**

### **Changes to Cervical Screening in Wales.**

Cervical Screening Wales is introducing testing for Human Papillomavirus (HPV) into the cervical screening programme from next week. The extra test will look for the high risk types of the HPV virus which causes nearly all cases of cervical cancer.

Cervical Screening Wales, part of Public Health Wales, will offer the test to women who have previously been treated for abnormal cells on the cervix, at their first follow-up smear test following treatment. This test is done on the same sample taken for the smear test, and will look to see whether there is any HPV infection remaining. If the HPV test is negative and the smear is normal or shows only mild changes, the woman's risk of abnormal cells is low and she can return to having three-yearly smear tests rather than needing repeat testing every year.

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### **New Regulation and Inspection Bill to be introduced early 2015 to improve care home quality.**

Deputy Minister for Social Services, Gwenda Thomas has said that 'care home inspections are keeping people safe- but more must be done'. This was during her announcement of a new Regulation and Inspection Bill due for early 2015 which aims to improve social care and safe guard vulnerable people in Wales' care homes.

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