

POLICY UPDATE

WE ARE
MACMILLAN.
CANCER SUPPORT

December 2015

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 Aimee Leverett, on 020 7091 2486 or email aleverett@macmillan.org.uk.

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United Kingdom

New guidelines to improve care for people at the end of life.

NICE has launched the first guidelines for the NHS on improving care for people who are in their last days of life.

The guidelines aim to put the dying person at the heart of decisions about their care, so that they can be supported in their final days in accordance with their wishes.

Around 500,000 people die each year in the UK. Of these deaths 75% are not sudden, but expected.

While a recent report has ranked end of life care in the UK as the best in the world, there are areas where care can be improved and made more consistent.

Until recently, the Liverpool Care Pathway (LCP) was used to provide good end of life care. It was withdrawn however, following widespread criticism and a subsequent Government review that found failings in several areas.

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England

NHS England appoints three new senior leaders.

NHS England has announced three senior appointments to lead key aspects of its work implementing the NHS Five Year Forward View.

Pauline Philip has been appointed as National Urgent and Emergency Care Director. Pauline will provide national leadership to ensure the delivery of the Urgent and Emergency Care review and associated elements of the NHS Five Year Forward View.

Anu Singh has been appointed as Director of Patient and Public Participation and Insight. She has begun her work developing partnerships with the people who use NHS services, and helping interpret what they think and feel of the services provided.

Matthew Swindells has been appointed as National Director for Commissioning Operations and Information. Matthew has 18 years operational and senior management experience in the NHS, and is currently Managing Director for population health with health technology company Cerner.

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Good care needs to be a co-production – Dr Martin McShane.

NHS England's National Clinical Director for Long Term Conditions Martin McShane looked at what co-production means to the Long Term Conditions (LTC) Unit.

The importance of LTC care has been set out in the Five Year Forward View.

The LTC, Older People and End of Life Care programme is essential to support most of the priority areas including cancer, urgent care, information revolution, primary care and new care models, Right Care and emerging work on self-care.

According to McShane “People who manage co-existing or multiple LTCs tell us they often experience disjointed care that can disempower them by not putting them at the centre through person-centred care and support planning”.

Through developing clinical policy in these areas, the work of the LTC Unit on person-centred care contributes to and helps align this work so that it makes sense to frontline clinicians and commissioners.

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Stock take of access to general practice in England.

People’s experience of accessing general practice remains positive, with almost 9 in 10 patients reporting in 2014-15 that they could get an appointment. Patient satisfaction with access is, however, gradually and consistently declining, and a fifth of patients report opening hours are not convenient, according to the report from the National Audit Office.

Worsening access to general practice matters: if patients cannot access general practice they are more likely to suffer poorer health outcomes or to use other, more expensive, NHS services such as accident and emergency departments.

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Scotland

Cancer waiting times.

The Scottish NHS continues to meet cancer waiting time targets of 95% of patients receiving cancer treatment within 31 days.

The figures, published by ISD Scotland, show that 95.2 per cent of patients had their first treatment within the 31 day standard from July to September. The average wait was seven days, and 90 per cent of patients waited 27 days or less.

For the 62 day referral to treatment standard, which applies to patients referred with an urgent suspicion of cancer, 90.0 per cent were treated within 62 days. The average wait was 39 days.

This year, the Scottish Government has invested £5.25 million to help health boards improve cancer waiting times. The funding is targeted at helping boards to meet the 62 day standard, by building diagnostic and treatment capacity. It is in on top of the £8.5 million invested over the past three years to improve cancer services, which runs alongside the £39 million Detect Cancer Early programme.

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Northern Ireland

Pharmacists' support for GPs welcomed.

GPs in Northern Ireland will be supported by practice-based pharmacists via a five-year, multi-million pound scheme, which follows BMA lobbying.

The BMA welcomed the announcement by health minister Simon Hamilton that will see up to £2.6m investment in 2016/17 — rising to £14m per year in 2020/21 — for pharmacists to work alongside GPs.

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Wales

£300m boost for the Welsh NHS in Budget.

An investment of nearly £300m for the Welsh NHS is at the heart of the Welsh Government's 2016-17 Draft Budget.

The 'Fairer, Better Wales – Investing for the future' Draft Budget aims to protect the public services that matter most to the people of Wales.

Despite a challenging settlement which has seen the Welsh Budget cut by 8% in real terms over five years, and 4.5% revenue cuts to come - a wide range of services will be protected by the Welsh Government including health, social services, schools and Further Education for the financial year ahead.

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100-day plans to improve cancer services across Wales.

Every health board in Wales has produced a 100-day plan to improve cancer services and waiting times, Deputy Health Minister Vaughan Gething announced.

The plans were unveiled by the Deputy Minister as the most recent cancer waiting times were published.

The figures for October 2015 show more than eight out of 10 people referred with suspected cancer start treatment within the 62-day target time, while nearly 97% of patients referred via the 31-day pathway start treatment within the target time.

To further improve services, health boards have prioritised a number of improvements within their 100-day plans, including:

- Focus on delivering the first outpatient appointment within 10 working days;
- Complete diagnosis and agree the decision to treat within 31 days;
- Prioritise patients referred for cancer treatment from unscheduled care services;
- Fill staff vacancies;
- Improve access to diagnostic services.

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Digital technology puts people in control of their health and social care.

People will be able to have a consultation with their GP using a smartphone and monitor their own health via digital devices as part of a new strategy to put digital technology at the heart of Wales's health and social care system.

As part of a new Welsh Government digital health and care strategy unveiled by Health and Social Services Minister Mark Drakeford, patients will also be able to access their own health records, book appointments and order prescriptions online, and use mobile devices to monitor long-term health conditions.

Welsh NHS and social care staff will be given access to the latest technology to access an up-to-date record of care for their patient or service user.

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