

POLICY UPDATE

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CANCER SUPPORT

September 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

NHS brain drain: why the busman's holidays?

The BMA reports that many doctors are choosing to work abroad, at a time when the UK is experiencing a national recruitment crisis in general practice and some other specialties. According to the BMA Future of General Practice survey, 9 per cent of GPs and 21 per cent of GP trainees hope to work overseas in the next five years. Last year, 4,925 doctors applied for a CCPS (certificate of current professional status) from the GMC, which is often needed to work overseas.

The BMA is calling for NHS Employers and the Government to develop incentives to encourage doctors to stay in the UK, in addition to a financial resettlement programme specifically designed to help doctors who wish to return.

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Further wage restraint is 'unrealistic', BMA warns.

The BMA has warned that recent efficiency savings in the health service have seen staff bear 'a disproportionate burden,' adding that further use of wage restraint is 'unrealistic'. In its submission to the Government's comprehensive spending review consultation, the BMA says staff pay freezes during the 2011/12 and 2012/13 financial years have resulted in a £1.7bn saving from the NHS budget.

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England

New ambitions for end of life care.

A new set of principles for ensuring consistent end of life care in hospitals, care homes and in hospices has been published. "Ambitions for Palliative and End of Life Care" gives details of the work that several organisations – including the Care Quality Commission – have agreed to do to improve local services so that people who use services have fair access to care, and that any care is based on individual needs.

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From 2020, people with suspected cancer will be diagnosed faster.

The government has pledged that from 2020, people with suspected cancer will be diagnosed within 28 days of being referred by a GP. Jeremy Hunt, the Secretary of State for Health announced that the government has committed to spend up to £300 million more on diagnostics every year over the next 5 years to help meet the new 28 day target. Mr. Hunt also announced new measures to develop a tailored recovery package for everyone surviving cancer.

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Government defines seven-day services.

The Government has clarified its plans for seven-day services after ministers' handling of NHS contracts were questioned by MPs. Ministers revealed that the focus of their plans would be on urgent and emergency care rather than elective treatments. The definition of seven-day services was revealed in answers to parliamentary questions. Meanwhile, health minister Ben Gummer faced criticism over the Government's handling of NHS contracts and conditions during a debate held Tuesday following a petition calling for a vote of no confidence debate in health secretary Jeremy Hunt.

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Government hints at less than 1 per cent pay rise.

Some public sector staff may receive less than a 1 per cent pay rise in a move labelled a 'disgraceful act of bad faith' by the BMA.

The Government announced in July's Budget that public sector pay rises — including those for doctors — would be capped at 1 per cent a year until 2020.

However, in a letter to the pay review bodies dated last week, chief secretary to the Treasury Greg Hands says 'some workers could receive more than 1 per cent while others could receive less'.

The pay review bodies have been instructed to receive evidence from Government departments on the needs of their workforces.

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Prime minister: show doctors your plan for seven-day services.

Doctors are urged to support a high-profile challenge by the BMA for the prime minister to reveal his plan for seven-day services.

In a series of national newspaper adverts, the association asks David Cameron seven questions over seven days about his plans for a seven-day NHS. Around 5,000 doctors and patients have already added their names — and many are showing their support on Twitter — to an open letter to Mr. Cameron asking him to 'show us your plan'.

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Personal health budgets spent on singing lessons.

BMA GPs committee deputy chair Richard Vautrey urged the Government to look into PHBs (personal health budgets), after an investigation revealed that some patients had spent money allocated by their CCGs (clinical commissioning groups)

on non-clinical treatments, such as a summer home, singing lessons and computer game consoles.

Dr. Vautrey said financial pressures in the health service meant it was vital funding was not 'frittered away'; adding that inappropriate use of funds could impact on other services.

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Health Secretary outlines vision for use of technology across NHS.

Patients will be able to access and interact with their GP record online within 12 months, Jeremy Hunt announced.

Speaking at the NHS Innovation Expo in Manchester, Mr Hunt made clear that by 2016 all patients should be able to access their own GP electronic record online in full, seeing not just a summary of their allergies and medication but blood test results, appointment records and medical histories. By 2018 this record will include information from all their health and care interactions.

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Care and treatment reviews to become 'business as usual'.

NHS England has set out how it intends that reviews of care and treatment arrangements for people with learning disabilities are to be embedded across the health and care system.

Care and Treatment Reviews (CTRs) were developed as part of NHS England's commitment to improving the care of people with learning disabilities or autism. The new draft policy and guidance will be finalised this autumn following feedback from those implementing it. It is the latest piece of work to emerge from the Transforming Care for People with Learning Disabilities programme, which is a joint piece of work between the NHS England, the LGA, ADASS, the Care Quality Commission (CQC), Health Education England (HEE) and the Department of Health (DH).

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Urgent action is a moral imperative – Tim Kelsey.

Tim Kelsey, **National Director for Patients and Information at NHS England**, **called for** committed leadership, technical capability and capacity, and prioritised funding for digital services in primary care.

He pointed to commitments in the The Five Year Forward View to transform care services and support delivery of the £22bn efficiency challenge through the information revolution. Last November the National Information Board (NIB) – which brings together organisations in the NHS, public health, clinical science, social care, local government and public representatives – also set out a framework for action to support those objectives in *Personalised Health and Care 2020*.

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£5million plan to improve the health of NHS staff.

Simon Stevens announced a major drive to improve and support the health and wellbeing of 1.3million health service staff.

Speaking at the at the Health and Innovation Expo 2015 conference in Manchester, the NHS England Chief Executive set out how NHS organisations will be supported to help their staff stay well.

This will include serving healthier food, promoting physical activity, reducing stress, and providing health checks covering mental health and musculoskeletal problems – the two biggest causes of sickness absence across the NHS.

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Managing conflicts of interest in NHS clinical commissioning groups.

The National Audit Office has published the findings from its investigation into managing conflicts of interest in NHS clinical commissioning groups. All GP practices are members of their local CCG. Within each CCG, some GPs are members of their CCG's board – its governing body. Under these arrangements there is potential for some GPs and their colleagues to make commissioning decisions about services they provide, or in which they have an interest. Where this is the case there is a risk that commissioners may put, or be perceived to put, personal interests ahead of patients' interests.

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Cancers are being diagnosed earlier in England

New PHE research shows the proportion of cancers diagnosed as a result of emergency presentation at hospital has decreased. At the same time, the proportion of cancers diagnosed through urgent GP referral with a suspicion of cancer (known as the two week wait) has increased. Presented at the second day of the PHE Conference 2015, these results are taken from the updated Routes to Diagnosis data, covering patients diagnosed with cancer from 2006 to 2013, with 2011-2013 being published for the first time.

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Scotland

Improving outpatient services.

A programme to deliver quicker and better outcomes for outpatients has been launched by Health Secretary Shona Robison.

The programme builds on best practice already in place across health boards and will use new technology, where appropriate, to speed up and enhance referrals and appointments.

It will focus on improving referral links between GPs and specialists and help ensure effective reminders for patients, cutting down on missed appointments.

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Consultant shortage puts patients at risk, warns BMA.

Rising consultant vacancies in Scotland are putting staff and services at risk, the BMA has warned.

Official figures released show that the number of vacant consultant positions has risen by almost a third in the last year, standing at 447.5 WTE (whole-time equivalent) posts in June 2015.

The number of posts unfilled for six months or more doubled over the same period, from 92.9 to 188 WTE posts.

BMA Scotland consultants committee chair Nikki Thompson said that, while the official vacancy rate was now 8.3 per cent, this was likely to be higher because a previous BMA Scotland investigation had shown that official numbers are underestimating the number of unfilled posts.

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NHS in the community plans.

The role of general practice in Scottish health service is set for a significant shakeup, First Minister Nicola Sturgeon confirmed on Monday. Over the next two years, ten health centres across the country will form 'community care teams' and test different ways of delivering healthcare. Two of the test sites will trial a new type of doctor to head up the multidisciplinary teams – and a small number of GPs will have the opportunity to receive an additional year of training to give them the skills to take on the new role and work across primary and acute care. Nurses and other health professionals will also have the chance to develop new skills as part of the plans.

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Northern Ireland

Making NHS patient feedback more inclusive.

A decision on the long-term future of GP practice-based pharmacists in Northern Ireland has been delayed.

GP federations are hoping to introduce pharmacists in all practices in the country as a way of addressing the increasing workload in primary care.

A £1m funding pot is to be made available to GP federations for the scheme in 2015/16 following an agreement between BMA Northern Ireland and the Health and Social Care Board in October.

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Wales

Wales' Chief Medical Officer Dr Ruth Hussey to retire.

Dr Ruth Hussey today announced her plan to retire next year after nearly four years as Wales' Chief Medical Officer and medical director of NHS Wales.

The chief medical officer provides independent professional advice on health and health care matters to Welsh Government Ministers. Dr Ruth Hussey joined the Welsh Government in September 2012 and has made a significant impact on health and health policy in Wales.

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New deadline for people to claim for their care being funded by the Welsh NHS.

The Welsh Government is asking people who believe their care should have been funded by the NHS to register their intent to make a claim. Continuing healthcare is a package of care provided by the NHS for those people with complex and primarily health-based needs. Under new arrangements for making retrospective claims for continuing healthcare, potential claimants have until October 1 to register their intent to make a claim for continuing healthcare costs which were incurred between August 1, 2013 and September 30, 2014.

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