

POLICY UPDATE

WE ARE
MACMILLAN.
CANCER SUPPORT

November 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

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England

King's Fund launches report on specialists in out-of-hospital settings.

The King's Fund has launched a report on specialists in out-of-hospital settings. The report is based on detailed research with six case studies working in new ways to deliver care outside hospital. Here you can read about the case studies in more detail, and watch interviews with specialists from each of the services.

[Click here for more information](#)

New currency for palliative care.

Based on a two year data collection from 11 sites covering both adults' and children's services, NHS England is developing a currency for palliative care which focusses on patient need. The aim of the work is to provide a transparent basis for palliative care commissioning

NHS England's initial thoughts on the currency model have been published to allow the palliative care community including clinicians, commissioners and providers to help shape its further development.

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Launch of the Five Year Forward View.

Chief Executive Simon Stevens has launched the NHS's Five Year Forward View. The Five Year Forward View is a collaboration between six leading NHS groups including Monitor, Health Education England, the NHS Trust Development Authority, Public Health England, the Care Quality Commission and NHS England.

It represents the first time the NHS has set out a clear sense of direction for the way services need to change and improve. As well as the national leadership of the NHS, the Five Year Forward View has also been developed in partnership with patient groups, clinicians, the voluntary sector and think tanks. The document, published in full on the NHS England website, sets out why the NHS needs to evolve, the challenges that lie ahead and how these can be met.

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Cancer Campaigning Group publishes report, *Cancer: Shifting Gear*.

The Cancer Campaigning Group, a coalition of national cancer-related charities representing service providers, research, advocacy and campaigning groups, has

published its new report. Cancer: Shifting Gear - Bringing England's cancer outcomes in line with the best in Europe.

The report takes stock of progress on cancer over the last 12-14 years and makes three recommendations for a new Government in 2015. These are for government to introduce a five year strategic plan; for the NHS to continue to improve the scope and scale of data collection; and for Commissioners and providers must be supported to design and deliver integrated cancer services that are coordinated and seamlessly built around the needs of a patient.

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Better Care Fund plans to help elderly and reduce hospital visits.

The Department of Health has announced the Better Care Fund plans to help join up local health and care services to improve care for the elderly and reduce A&E admissions. The plans, which will also provide more dignity for older people and reduce the length of stay in hospital, are funded by the government's £5.3 billion Better Care Fund. It was originally set at £3.8 billion but has increased significantly following additional local investment.

It will bring GPs, community nurses, and care workers together so they can provide better care closer to home. NHS England estimates that the Fund will be supporting at least 18,000 individuals in roles providing care out in the community. The plans will improve people's experience of health and care services by providing 7 day care services, a named professional coordinating services around a person's needs, joint assessments, and better information sharing.

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Final Care Act guidance published.

The final Care Act guidance has been published, with regulations and guidance for local authorities strengthened as a result of consultation. The government response explains how the regulations and guidance, which come into effect from April 2015, have been revised as a result of the suggestions received during the consultation.

In addition to the revised regulations and guidance for local authorities there will be more materials to help those implementing the Care Act on the Local Government Association's website. The Care Act factsheets have also been updated. The Care Act aims to make the social care system fairer and help people get better care.

[Click here for more information](#)

King's Fund publishes *People in control of their own health and care* report.

The King's Fund has published *People in control of their own health and care: The State of Involvement*, a report looking at how people are involved in their own health and care. In addition to making the case for the need for people to be involved in their own care, the

report identifies changes that need to be made to ensure greater patient involvement. These include consistent and meaningful national support, recognising and addressing different perspectives on involvement, and a new compact between citizens and services.

According to the report NHS England's programme of work on transforming participation provides a first step, but more must be done. In particular, national bodies need to develop a model of professional education and training based on working with users and citizens; provide staff and patients with access to high-quality tools for structuring and recording care-planning and shared decision-making; measure involvement and hold organisations to account; and, enable local organisations to focus on patients not politicians, with a national approach to reform that supports organisations to lead change locally

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Next Steps towards primary care co-commissioning.

The Next steps towards primary care co-commissioning document has been published. It has been developed by the joint CCG and NHS England primary care co-commissioning programme oversight group in partnership with NHS Clinical Commissioners. The purpose of the document is to give CCGs the opportunity to choose afresh the co-commissioning model they wish to assume. It clarifies the opportunities and parameters of each co-commissioning model and the steps towards implementing arrangements. The document is accompanied by a suite of practical resources and tools to support local implementation of co-commissioning arrangements.

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NHS England Announces Updated Procedure for Cancer Drugs Fund.

NHS England has published its updated procedure for evaluating drugs in the Cancer Drugs Fund (CDF). Since it was established in 2010, more than 55,000 patients have accessed treatment through the CDF – around 2,000 every month.

Last week NHS England's board confirmed its support for proposed changes to the evaluation process for drugs available via the CDF, after considering responses to a four-week consultation on plans set out earlier this year. In addition, the CDF's Standard Operating Procedure has been updated in light of the consultation outcome.

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Personalised Health and Care 2020: a Framework for Action.

The Department of Health has published 'Personalised Health and Care 2020: a framework for action'. Aimed to improve the use of data and technology to in turn improve health, and transform the quality and reduce the cost of health and care services. This framework has been developed based on evidence from many sources, including civil society and patient organisations, as well as directly from service users. It is not a national plan, but a framework for action that will support frontline staff, patients and citizens to take better advantage of the digital opportunity.

The National Information Board will report annually on progress made against the priorities detailed in this framework and review them each year to reflect changing technology and accommodate new requirements from the public and staff.

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Scotland

Investment in general practice not enough says BMA.

The BMA has warned that a £40m investment in general practice and primary care in Scotland will not be enough to tackle increasing pressures. The Scottish government has announced that a new primary care development fund would be used to support new ways of delivering services. The extra funding will be targeted at areas where there are particular pressures, such as deprivation, rurality, and a high proportion of older patients.

Health and well-being secretary Alex Neil said the money would ensure that GPs and primary care professionals could help evolve health services to meet the changing needs of the people of Scotland. He said: 'GPs and primary care professionals will be vital to ensuring that health and social care are effectively integrated from April next year, and this new investment will help them design and implement primary care services that best meet the needs of their communities.'

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Technology enabled care.

A £10 million fund to increase the number of people receiving diagnosis and treatment at home will support the roll-out of new technology across Scotland's NHS. Health Secretary Alex Neil says that the *Technology Enabled Care* programme will double the number of people receiving technology-enabled clinical consultations and home health monitoring by 2016. Technology gives people, particularly older people in remote communities, improved access to the NHS while cutting unnecessary hospital admissions.

The fund, announced in March, will be used to fund five key areas: the substantial expansion across Scotland of home health monitoring within integrated care settings;

extending the use of NHS video conferencing facilities to other partners, increasing the numbers and range of users and doubling the level of clinical consultations; increasing the numbers of people receiving telecare packages; sustaining and expanding on-line platforms to give people direct access to information, advice and assistance; exploring the scope and benefits of switching current provision of Telecare from analogue to digital telecare.

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Public Health review in Scotland.

The Scottish Government is to carry out a review of public health services to build on the progress made to tackle health inequalities. The review was announced by Michael Matheson, Minister for Public Health, at a speech to the Faculty of Public Health Conference in Aviemore.

He told the audience that public health policy must reflect the changing face of Scotland. Integration of health and social care, Westminster welfare reforms, and possible new powers for the Scottish parliament should all change the way we view public health policy, he said. The review will begin in December 2014 and will report its first findings next summer. A review group is currently being established to begin work next month.

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Health Inequalities statistics published.

Scotland's Chief Statistician has announced the publication of the latest Long-term Monitoring of Health Inequalities: Headline Indicators report. The gap in health outcomes between the most deprived and least deprived areas of Scotland is reported for a variety of indicators in absolute and relative terms. The latest figures include data up to 2012. Across the full range of indicators, relative inequalities have remained highest for the all-cause mortality, coronary heart disease mortality and alcohol-related indicators throughout the period covered by this report.

There is no clear long-term trend in cancer incidence inequalities (ages under 75 years), while, for cancer deaths (ages 45 to 74 years), relative inequality has increased slightly over the long term. Of the four most common types of cancer, inequality levels - in regard to both incidence and deaths - are highest for cancer of the trachea, bronchus and lung.

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Protecting Scotland's Health Services

Health Secretary Alex Neil has pledged to continue protecting Scotland's NHS following an Audit Scotland report on its performance and long term plans. As outlined in the budget,

the NHS revenue budget has increased by £256 million and is set to rise further, taking health spending above £12 billion for the first time.

The Audit Scotland report highlights the financial challenges facing the NHS in Scotland and the impact of cuts in the Scottish budget from Westminster, warning “the Scottish Government will need to plan for health spending within an overall reducing budget”.

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Fall in Cancer Deaths.

Death rates from cancer in Scotland have fallen by 11.4 per cent over the last ten years, according to new figures. The figures show a greater decrease in cancer mortality rates among men than women, with a drop of 15 per cent compared to 5.8 per cent.

For women the largest decreases in mortality rates were stomach, breast, which is the most common cancer diagnosed in women, and ovarian cancer.

In men, the largest decreases were seen in stomach, lung and bowel cancer. Mortality rates from prostate cancer, the most frequently diagnosed cancer in males, have also decreased by almost 12 per cent since 2003.

[Click here for more information](#)

Northern Ireland

Health Minister underlines commitment to achieving transformation in health and social care services.

Health Minister, Jim Wells, has underlined his personal commitment to achieving transformation in health and social care services at Policy Forum NI’s ‘Transforming Your Care’ seminar. Minister Wells acknowledged the hard work of staff across the HSC and their dedication to maintaining services and delivering good outcomes for service users. He particularly highlighted the opportunities taken by staff to develop new ways of working to support joined up care delivery.

Reflecting on the development of Integrated Care Partnerships across Northern Ireland as part of the implementation of Transforming Your Care, the Minister said: "The work undertaken by integrated care partnerships will help to improve the patient journey, support the management of long term conditions and avoid unnecessary hospital admissions." The Minister also emphasised that, despite the significant challenges facing health and social care, that there are also opportunities to adopt new approaches which support enhanced patient care.

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Wells reiterates everyone's right to expect the best treatment the health service can provide.

Health Minister Jim Wells has said that everyone has a right to expect the best treatment and care that the Health Service can provide. The Minister was speaking as he launched a consultation on the draft Northern Ireland Rare Disease Implementation Plan. The draft Plan sets out a framework to support continued action and new developments to tailor how to provide services for people with rare diseases over the next six years. Speaking at the Northern Ireland Rare Disease Partnership (NIRDP) Autumn Event, Minister Wells said: "Everyone has a right to expect the best treatment and care that the Health Service can provide, whether their condition is one of the many conditions which are known under the collective banner of 'rare disease' or one that is more prevalent.

[Click here for more information](#)

Wales

Continued progress towards a 'healthier, happier, fairer' Wales.

Families and patients rated palliative care services in Wales overwhelmingly positive, a new report shows. The average feedback score for specialist palliative care services, according to the results of the iWantGreatCare survey was 9.56 out of 10. These results are contained in the end-of-life care annual report – the first report of its kind to give a comprehensive overview of palliative care services in Wales.

Some 32,000 people die in Wales every year, largely following a chronic illness such as heart disease, cancer, stroke, chronic respiratory disease, neurological disease or dementia. Three-quarters of people have some form of palliative care need at the end of their life.

The Welsh Government's aim for end-of-life and palliative care services is that people in Wales should have a healthy, realistic approach to dying, planning appropriately for the event. Palliative and end-of-life care has improved significantly since 2008, when the Welsh Government invested in specialist palliative care services, with more than £6.4m of funding to hospitals and hospices in Wales during 2012-13.

[Click here for more information](#)

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

New rights to complain about private social services and palliative care services have come into force for people in Wales who fund their own social care or receive palliative care. As of 1st November, people will be able to make complaints about those services to the Public Services Ombudsman for Wales (PSOW) under a change to the law.

The change is being introduced as a result of the Welsh Government's landmark Social Services and Well-being (Wales) Act 2014. Provision in that Act, among other things,

amends the Public Services Ombudsman (Wales) Act 2005. The PSOW has legal powers to look into complaints about public services in Wales. Until now, the Ombudsman has only been able to investigate complaints relating to health and social care regarding services provided or commissioned by a local authority or Local Health Board.

[Click here for more information](#)

Health Minister unveils new standards of care in NHS Wales.

New standards to ensure everyone in Wales receives the same level of high-quality care from the Welsh NHS have been unveiled by the Welsh Government. The new standards, which are subject to a 12-week public consultation, set out what NHS Wales needs to do to demonstrate it is doing the right thing, in the right way, in the right place, at the right time and with the right staff.

The new standards bring the existing Fundamentals of Care standards and health standards together in one framework. There will be one integrated Health Standards Framework, which streamlines the 26 Standards for Health Services in Wales and the 12 Fundamentals of Care standards.

[Click here for more information](#)

New system to ensure a more timely and consistent approach for new and innovative medicines to be introduced in Wales.

A new system to ensure patients have fair and equitable access to new and innovative, evidence-based treatments will be introduced in Wales, Health and Social Services Minister Mark Drakeford has announced. The new system will apply to so-called “orphan” and “ultra-orphan” medicines and treatments for patients with rare diseases. The Minister has also announced the Individual Patient Funding Request (IPFR) process, which gives some patients access to innovative medicines not routinely available on the NHS, is to be strengthened.

The changes follow consultation on recommendations about the future of the IPFR process arising from a review commissioned by the Welsh Government in October 2013. It considered how the current IPFR process could be improved, with a particular emphasis on transparency and consistency of decision making between IPFR panels.

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