

Locality Commissioning Meeting Oxford City

Date of Meeting: 8.11.18	Paper No: 12					
Title of Paper: Oxfordshire Cancer Care Review Implementation Support Scheme						
Is this paper for (please delete ticks as appropriate)	Discussion	<input type="checkbox"/>	Decision	<input type="checkbox"/>	Information	<input checked="" type="checkbox"/>

Purpose of Paper:

Oxfordshire Clinical Commissioning Group (OCCG) is looking for all GP practices across the County to adopt the new template and taking on two cancer care reviews per patient review. This can be carried out by a GP or Nurse. Funding is available and LMC have approved the scheme.

The Cancer Care Review Implementation Support Scheme will be communicated to practices in November 2018 with the expectation that those who sign up will commence using the template from January 2019 with the scheme initially running for 12 months, after which the position will be reviewed.

There is an information pack in the appendices within this document. We are also encouraging all practices to have a representative attend an engagement and awareness engagement event in January which will cover a number of cancer related topics including the completion of the cancer care review.

Action Required:

Sign up is optional – via the Agreement to Participate form below.

If you have any questions, Zoe will attend the December City main Locality meeting, or please email them to the email below.

Author: Zoe Kaveney, Planned Care Oxfordshire CCG occg.plannedcare@nhs.net	Clinical Lead: Dr David Chapman
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Oxfordshire Cancer Care Review Implementation Support Scheme

Agreement to participate (2018/19 – 2019/20)

Practice Name: Code: K.....

The Practice confirms that it wishes to participate in the Oxfordshire Cancer Care Review Implementation Support Scheme in line with the provisions set out in the ***Scheme Specification***

Designated Cancer Champion:

Champion to attend Event on 17th January: YES NO

Signed on behalf of the practice:

Name:

Title:

Date:

Please return a signed copy of this form to:
Zoe Kaveney, Planned Care Oxfordshire CCG, Jubilee House, 5510 John Smith Drive, Oxford Business Park South, Cowley, Oxford OX4 2LH

or by email with electronic signature to occg.plannedcare@nhs.net

PLEASE RETURN THIS FORM BY

FRIDAY 14TH DECEMBER 2018

Oxfordshire Cancer Care Review Implementation Support Scheme 2018/19 – 2019/20

1.0 Background

The Oxfordshire Cancer Care Review Implementation Support Scheme is one part of the Thames Valley Cancer Alliance's (TVCA) five-year delivery plan to improve outcomes for people with cancer by 2020. It aligns with the national cancer strategy '[Achieving World-Class Cancer Outcomes \(A Strategy for England 2015-2020\)](#)'.

Active management of cancer is largely centred in Secondary Care but Primary care plays a key role in supporting patients and their family living with Cancer and research has indicated that patients with cancer value the role of Primary Care even though the Primary Care team's role in Cancer care is currently not well defined.

Traditionally primary care has focused on palliative care but there are increasing numbers of cancer patients who are not receiving palliative care and are in phases of:

- Diagnostics
- Treatment
- Post treatment

QOF (Quality and Outcomes Framework) CCR (Cancer Care Review) has been created as solution to the evolving needs of Cancer patients in Primary Care, the QOF alert asks for the CCR to be completed within 6 months of diagnosis. This is currently a single tick box and there is no current standardised explicit detail to demonstrate this has been completed.

Oxfordshire currently have good compliance in reporting that the 6 month QOF requirement has been completed with unofficial 17/18 figures showing 95% compliance for the county; However the quality of these reviews are unknown. (Expected cohort for reviews based on 17/18 figures can be found in Appendix 2)

In striving for excellence in Cancer Care, themes need to be defined to ensure we cover best practice. The Thames Valley Cancer Alliance (TVCA) has developed a template and added a second CCR to be completed within 6-12 months. This will pick up on themes that may only be relevant at the latter stage of the patients' journey, as well as formalising another opportunity for the CCR to be carried out.

Funding from NHSE has been allocated to Oxfordshire to enable some targeted work to take place to assist Practices in adopting the new template (See appendix 1) and the approach to cancer care reviews.

Oxfordshire Clinical Commissioning Group (OCCG) is looking for all GP practices across the County to adopt the new template and taking on two cancer care reviews per patient review. This can be carried out by a GP or Nurse.

2.0 The Cancer Care Review Implementation Support Scheme

The Cancer Care Review Implementation Support Scheme will be communicated to practices in November 2018 with the expectation that those who sign up will commence using the template from January 2019 with the scheme initially running for 12 months, after which the position will be reviewed.

There is an information pack in the appendices within this document. We are also encouraging all practices to have a representative attend an engagement and awareness engagement event in January which will cover a number of cancer related topics including the completion of the cancer care review. See Appendix for a draft agenda

Practices that choose to enrol in the scheme will need to complete the following:

- Assign a clinical champion for the practice
- Upload the EMIS/Vision Template onto their systems
- Set up 6 and 12 month alerts for their patients
- Use the template to carry out a care review
- Administer evaluation forms to those patients who have completed a review
- Report progress throughout the year at specific times using the template supplied
- Attend the event in January

We are asking practices to use this template for both the 6 month review; which is already a requirement by QOF but has no standardised approach and to increase their offer to inviting patients back for a further review between 6-12 months post diagnosis

There will be engagement with and support for these practices to conduct the reviews, through the template which is available to upload on both EMIS and Vision Systems. There is also a letter template for practices to send to patients (Appendix 3), A patient evaluation form to help measure the effectiveness of the new approach (Appendix 4) and Some top tips in carry out a review (Appendix 5). We will also be holding a training event in January with support from Macmillan and CRUK and will include Cancer Care reviews.

3.0 Payment for GP practices

The TVCA has provided funding to support this scheme for 18/19 and part of 19/20. It allows time for the practice and nominated cancer champion in each practice to upload the template and implement the new approach.

Practices who agree to take part will receive funding. The payment breakdown per enrolled practice will be as follows;

1. £250 to be awarded for signing up to the scheme, uploading the template to be used for both the 6 month and 12 month review and for identifying a cancer champion
2. £200 for attendance at the engagement event in January 2019
3. £14.00 will then be rewarded on a per review basis. Calculations will be based on completion of the template at the 12 month review (no additional

payment will be made for the 6 month review due to QOF but we do expect that by signing up to this scheme practices will use this template for the 6 month review also). Payments will be made following the quarterly reports as outlined below.

3.1 Information reporting requirements

CSU will also be pulling data on the number of reviews being carried out using codes 8BAV (6month review) and 90k6 (12 month review). Payment will be based on January19 – December 2019 compliance. The practice will need to submit a 6 monthly report with the results of their patient experience surveys. Continuation of this scheme will be based on an annual review.

4.0 Key Milestones

1.0	Approach agreed by the TVCA, OCCG executive team and LMC	30/10/2018
2.0	Communication to primary care to highlight the new template and approach to cancer care reviews asking Practices to sign-up to the scheme	01/11/2018
2.1	A 'save the date' notification circulated to practices for a training and engagement event in January	01/11/2018
3.0	Practices to confirm sign up to the scheme including confirmation of cancer champion who will be responsible for the ongoing implementation of the scheme.	14/12/2018
3.1	Practice to confirm attendance at Cancer training and engagement event	14/12/2018
3.2	Practices to confirm that templates have been uploaded onto the EMIS System and communication about its use circulated to relevant clinicians	31/12/2018
4.0	OCCG to hold an engagement event to introduce cancer champions to the team, enable networking, Discuss the Scheme, raise awareness of support for patients and further training for staff. All cancer champions will need to attend the event. Event will be held at the Kasaam Stadium 1-5pm	17/01/2019
5.0	Q4 18-19 Report pulled to see uptake in Cancer Care reviews carried out	30/04/2019
5.1	Q1 19-20 Report pulled to see uptake in Cancer Care reviews carried out and practices to submit questionnaire feedback report	31/07/2019
5.2	Q2 19-20 Report pulled to see uptake in Cancer Care reviews carried out and practices to submit questionnaire feedback report	31/10/2019
5.3	Q3 19-20 Report pulled to see uptake in Cancer Care reviews carried out and practices to submit questionnaire feedback report. CCG to confirm payment award.	31/01/2020

APPENDIX 1: Cancer Care Review Template (6 and 12 month)

DRAFT Cancer Care Review Template

Page 1

Care Review

- ☐ Cancer care review done <6 months (8BAV - Cancer care review)
.....
- ☐ Cancer care review done 6-12 months (9Ok6 - Cancer short term health assessment)
.....
- ☐ Next review due (8BAV - Cancer care review)
.....

Cancer Site

Site of cancer

- ☐ B00 - Malignant neoplasm of lip
- ☐ B01 - Malignant neoplasm of tongue
- ☐ B02 - Malignant neoplasm of major salivary glands
- ☐ B03 - Malignant neoplasm of gum
- ... and 58 more
- ☐ _____
.....
- ☐ Primary cancer unknown (B593 - Primary malignant neoplasm of unknown site)
.....
- ☐ Metastases (BB03 - [M]Neoplasm, metastatic)
.....

Stage in Cancer Journey

- ☐ Patient in remission (212F - Patient in remission)
.....
- ☐ Chemotherapy (8BAD - Chemotherapy)
.....
- ☐ Radiotherapy (7M371 - Radiotherapy NEC)
.....
- ☐ Surveillance (9Ok4 - Active monitoring)
.....
- ☐ Hormonal therapy (7Q0J0 - Cancer hormonal treatment drugs Band 1)
.....
- ☐ Palliative (ZV57C - [V]Palliative care)

DRAFT Cancer Care Review Template

☐ Terminal (8BA2 - Terminal care)

Preferred Place of Care

- ☐ 8Ce0 - Preferred place of care - home
- ☐ 8Ce1 - Preferred place of care - hospice
- ☐ 8Ce3 - Preferred place of care - hospital
- ☐ 8Ce4 - Preferred place of care - nursing home
- ... and 7 more
- ☐ _____

Capacity

☐ Has mental capacity to give consent (ESCThA2 - Has mental capacity to give consent)

☐ Lacks mental capacity to give consent (2JR - Lack mental capacity make decision Mental Capacity Act 2005)

☐ Best Interests decision made on behalf of patient (9NgE - Best interest decision made on behalf of patient (MCA 2005))

Lasting Power of Attorney

- ☐ 9W - Power of attorney
- ☐ 9W7 - Has appointed person with property and affairs LPA MCA 2005
- ☐ 9W8 - Has appointed person with personal welfare LPA (MCA 2005)
- ☐ 9W80 - Has apnt persn persnl welf LPA auth life sust decns MCA 2005
- ... and 1 more
- ☐ _____

Consent to Share Information

Express consent for core and additional SCR dataset upload

- ☐ 9NdG - Consent given to share patient data with specified 3rd party
- ☐ 9NdH - Declined consent to share pt data with specified 3rd party
- ☐ 9NdJ - Consent withdrawn to share pt data with specified 3rd party
- ☐ 9Ndn - Express consent for core and additional SCR dataset upload
- ... and 1 more
- ☐ _____

Diagnosis and Care Discussion

DRAFT Cancer Care Review Template

☐ Cancer diagnosis discussed (8CL0 - Cancer diagnosis discussed)

Awareness of Diagnosis

- ☐ 1H0 - Patient aware of diagnosis
☐ 1H1 - Patient not aware of diagnosis

☐ Discussion about treatment (8CP - Discussion about treatment)

☐ Discussion about complications/consequences of treatment (8CP3 - Discussion about complication of treatment with patient)

☐ Treatment Summary (8BCF - Cancer hospital treatment completed)

The Karnofsky performance scale is a measure of the patient's overall performance or ability to perform activities of daily living. It is a single score between 10-100 assigned by a clinician based on observations of a patient's ability to perform common tasks relating to activity work and self care.

Scoring scales:

100%=Normal, no complaints or evidence of disease
90%=Able to carry on normal activity, minor signs or symptoms of disease
80%=Normal activity with some effort, some signs or symptoms of disease
70%=Care for self, unable to carry on normal activity or do active work
60%=Occasional assistance but is able to care for most needs
50%=Requires considerable assistance and frequent medical care
40%=In bed more than 50% of the time
30%=Almost completely bedfast
20%=Totally bedfast and requiring nursing care and/or family
10%=Comatose or barely arousable
0%=Dead

☐ Karnofsky performance status (38GF - Karnofsky performance status)

☐ Cancer plan, Anticipatory care plan (8CMM - Has anticipatory care plan)

☐ Cancer care plan discussed with patient (8CP0 - Cancer care plan discussed with patient)

☐ Medication review (8B314 - Medication review)

DRAFT Cancer Care Review Template

Emergency contact details

☐ Has a carer (918F - Has a carer)

.....

☐ Does not have a carer (918V - Does not have a carer)

.....

☐ Emergency contact details (918x - Emergency contact details)

.....

☐ Patient's next of kin (9182 - Patient's next of kin)

.....

Resuscitation

☐ ADRT (9NgG - Has ADRT (advance decision to refuse treatment) (MCA 2005))

.....

☐ Resuscitation discussed with patient (67P0 - Resuscitation discussed with patient)

.....

Resuscitation Status

☐ 1R00 - For attempted cardiopulmonary resuscitation

☐ 1R10 - Not for attempted CPR (cardiopulmonary resuscitation)

.....

Health & Welbeing

☐ Housebound (13CA - Housebound)

.....

☐ Holistic needs assessment carried out (389H - Holistic needs assessment)

.....

☐ Health promotion (6B - Health promotion)

.....

☐ Psychological counselling (6779 - Psychological counselling)

.....

Smoking Status

☐ 1371 - Never smoked tobacco

☐ 137R - Current smoker

☐ 137K - Stopped smoking

☐ 137S - Ex smoker

DRAFT Cancer Care Review Template

... and 2 more

☐ _____

☐ Alcohol consumption (136 - Alcohol consumption)

Financial

☐ DS 1500 Disability living allowance completed (9EB5 - DS 1500 Disability living allowance completed)

☐ Has disabled driver badge (13V8 - Has disabled driver badge)

☐ Entitled to prescription exemp (6616 - Entitled to prescription exemp)

Referral to:

☐ Social prescribing offered (9NSE - Social prescribing offered)

☐ Social prescribing declined (8IEp - Social prescribing declined)

☐ Referral to social prescribing service (8T09 - Referral to social prescribing service)

☐ Referral to hospice (8HY - Referral to hospice)

☐ Referral to Macmillan nurse (8HH6 - Referral to Macmillan nurse)

Community Team

☐ 9NgD - Under care of palliative care service

☐ 9NNg0 - Under care of clinical nurse specialist

☐ 9NNg1 - Under care of community-based nurse

☐ 9Nh0 - Under the care of community palliative care team

... and 21 more

☐ _____

APPENDIX 2: Cancer Care Review Expected Cohort Numbers

APPENDIX 3: Cancer Care Review Appointment Letter

Practice Address

Private and Confidential

Telephone:
Email:

Date: XX/XX/XX

Dear

Re: Cancer Care Review

We see from the letter we have had from the hospital that you have recently been given a cancer diagnosis

Many people at a time like this find it helpful to discuss this diagnosis, and any treatment planned, with the practice nurse or your doctor who can often give additional information or support.

You may have already met your Cancer Nurse Specialist or key worker at the hospital. If you have been given a Treatment Summary please bring this along to your appointment and if you have had a Holistic Needs Assessment (HNA) we can use this in our appointment to discuss any unresolved concerns. If you have not previously completed one of these with the hospital a paper version is enclosed for you to use if you would like to.

(The HNA is a checklist of common concerns that people may have when going through treatment and it can help you to identify what support can be offered to meet your needs.)

We call this initial appointment a Cancer Care Review, and if you are still undergoing treatment we will be here to support you. We will usually offer you another Cancer Care Review appointment at the end of your treatment, so that we can discuss possible side effects, or any concerns or fears that you (or those close to you) may have. This gives us an opportunity to help you get the right continued support.

If you would like to make an appointment for your Cancer Care Review please go online at XXXX, or speak to our receptionists. If you are feeling too unwell to attend the surgery a home visit may be arranged.

A family member, friend or carer is welcome to come with you to the appointment

Please contact the surgery to make an appointment and please mention that this is a Cancer Care Review so that we are able to allocate more time.

Yours sincerely

Dr

APPENDIX 4: Cancer Care Review evaluation questionnaire

Thank you for taking the time to complete this questionnaire.

You have been given this questionnaire following a Cancer Care Review appointment with either your GP or another practice staff member to review your health and wellbeing after treatment following a cancer diagnosis. This is known as a Cancer Care Review appointment. This appointment is designed to understand and respond to all the different types of support people might need.

We would like to understand your experience receiving this Cancer Care Review, how effective these appointments are and whether you felt listened to and supported appropriately.

This survey should take about 10 minutes to complete. If you have any questions or would like to discuss any aspect of the survey for further clarification please approach a member of staff at your practice.

1. Who did you meet at your appointment?

- ☐ GP
- ☐ Practice nurse
- ☐ Other – please specify

2. Where did your appointment take place?

- ☐ GP Practice
- ☐ In your own home
- ☐ Over the telephone
- ☐ Other – please specify

3. How long was your appointment?

- ☐ Less than 5 mins
- ☐ 5 - 10 mins
- ☐ 10 – 15 mins
- ☐ 15 - 20 mins
- ☐ More than 20 mins

4. During your appointment, what did you discuss?
Please choose from below. Tick all subjects you discussed.

- ☐ Your diagnosis
- ☐ Your treatment
- ☐ Physical symptoms – feeling tired, pain, or cough etc.
- ☐ Psychological symptoms – feeling scared, having worries and anxieties
- ☐ Advice on how to stay well; physical activity & nutrition, stopping smoking etc.
- ☐ Advice about housing, benefits or returning to work
- ☐ Planning for your future care and treatment (care plan)
- ☐ Other – Please specify

5. During the appointment did you have enough time to talk about the things that are important to you?

- ☐ Yes
- ☐ No – Please tell us why

6. Was the member of practice staff you saw aware of your diagnosis and treatment so far?

- ☐ Yes
- ☐ No – Please tell us more about this

7. Was the member of practice staff you saw able to discuss with you possible consequences and side effects of treatment?

☐ Yes – Please tell us a bit more

☐ No – Please tell us a bit more

8. Following your appointment do you feel that you:

	Yes	No
Are able to discuss your ongoing care and support needs with your GP or practice nurse?	<input type="radio"/>	<input type="radio"/>
Were able to contribute to the future planning of your care?	<input type="radio"/>	<input type="radio"/>
Have the information you need to manage your health?	<input type="radio"/>	<input type="radio"/>
Have been signposted to local support services, and/or a Health and Wellbeing Event or support event?	<input type="radio"/>	<input type="radio"/>
Understand ways in which you can change your lifestyle to improve your health?	<input type="radio"/>	<input type="radio"/>
Could take future questions about your health and wellbeing to your GP?	<input type="radio"/>	<input type="radio"/>

9. Do you have any other comments you would like to add?

Thank you

Please hand your completed questionnaire to a member of reception staff.

APPENDIX 5: Carrying out an effective Review – Top Tips

**1. Carry out the cancer care review face-to-face**

While patients derive enormous benefit from any contact from the practice after a cancer diagnosis, it is often more beneficial for both GP and patient to undertake a Cancer Care Review (CCR) face-to-face rather than on the phone. With increasing numbers of people surviving their cancer diagnosis, cancer follow up in primary care is likely to start to resemble that of other chronic diseases like COPD or Diabetes. You should therefore consider involving your practice nurses in the CCR process at the earliest opportunity.

2. Use a dedicated appointment slot

A good CCR needs its own consultation. Ideally a double appointment, but if not, an initial appointment with a follow up. Setting aside an appointment in this way and inviting the patient to attend sends a powerful message that primary care has a useful role for those affected by cancer.

3. Invite patients to bring a family member, carer or close friend

Having a close friend or family member at the cancer care review may make your patient feel more supported, able to raise important issues, and help them to recall more of the conversation later. You will also get a much clearer idea of the impact the diagnosis has had on the wider family group.

4. Help patients to prepare by sending them information in advance

Patients may be unsure about what the purpose of the review is and whether to bring up particular issues with you e.g. sexual problems or finances. It is often useful to send the patient, either with the invitation or in the days before the appointment, a clear idea of what the purpose of the appointment is, and some examples of topics which they might find useful to discuss. Even better is to consider sending them a

paper version of the Holistic Needs Assessment to complete prior to the appointment – this will help better identify the issues that are important for the patient.

5. Check patients understanding of their treatment and possible late consequences

Ask about and record current or planned treatment with chemotherapy or radiotherapy, include what has been given and in the case of radiotherapy, where it has been given. This is a useful opportunity to check the patients understanding of the purpose of any treatment. The type and location of treatments can have profound implications for the development of treatment consequences in the months and years after treatment ends.

6. Choose a review template that suits your consultation style

A basic suggested structure is:

- Review medication - Discuss diagnosis, treatment and potential consequences (physical, emotional, social)
- Discuss any financial implications, and provide further information or signpost to further advice and guidance
- Find out about the patients support network and signpost to other sources of support as appropriate
- Agree a date for the next review, or agree that another will happen at points of transition
- Give the patient the opportunity to raise anything else they wish to discuss

7. Find out what advice and support is available for you and your patients

There may be concerns expressed within the CCR which aren't strictly medical such as financial difficulties, or ones which you feel are outside your area of expertise such as sexual problems or how

to discuss the diagnosis with dependents. There is a wealth of comprehensive information produced by Macmillan on different cancer types, treatments, consequences and financial matters. These are available to order online at be.macmillan.org.uk

Additionally there are a range of local and national services set up to address these issues, such as the Macmillan Support Line. Get to know what services your patients can access locally and what the routes to access are.

8. Use the review as an opportunity for health promotion

After a cancer diagnosis patients may be more receptive to high impact health promotion. There is increasing evidence that physical activity can have a significant impact on both physical and psychological health after a cancer diagnosis, as well as reducing the risk of recurrence and the impact of any treatment consequences.

9. Complete the electronic template in the patients' notes

Macmillan GPs have worked with the main General Practice IT systems including EMIS and Vision (INPS) to produce CCR templates. These can be used as an aide memoir when carrying out a CCR and also provide a helpful record of topics discussed.

10. Consider sharing a copy of the review with the patient's cancer care team

When you have completed the CCR, consider updating the oncologist or CNS to link in with the Holistic Needs Assessment and to demonstrate positive working between primary and secondary care to ensure the best experience for the patient.

APPENDIX 6: Evolution of the Cancer Care Review

BRINGING THE RECOVERY PACKAGE INTO GENERAL PRACTICE: AN EVOLUTION OF THE CANCER CARE REVIEW (CCR).

The Cancer Care Review is an integral part of the Recovery Package.

Our aim was to bring the Recovery package into General Practice by developing a Cancer Care Review template that makes links with the other elements of the Recovery package. We wanted to put the Cancer Care Review at the heart of the Recovery Package and support the GP / primary care professional to play a central role in the long-term support of patients living with cancer.



Macmillan GPs worked collaboratively in Nottinghamshire to develop a comprehensive electronic Cancer Care Review template, integrated into the clinical system. Being mindful of time constraints in both GP and nurse consultations, the template has been designed to be practical and intuitive, providing a structure, with prompts, to facilitate a comprehensive yet natural conversation.

An accompanying video tutorial has also been developed, making the case for a good quality CCR and providing clinicians with relevant supporting information. It outlines other aspects of the Recovery Package, exploring Health Needs Assessments and Care Planning and examples of Treatment Summaries. It also encourages the use of a pre-consultation patient questionnaire (patient prompt) to facilitate an effective and holistic CCR.

Macmillan GP Facilitators:

- Dr Heetan Patel, Nottingham City CCG
heetanpatel@nhs.net
- Dr Julie Barker, Newark & Sherwood CCG
Julie.barker20@nhs.net
- Dr Vicki Clarke, Mansfield & Ashfield CCG
Victoria.clarke5@nhs.net

APPENDIX 7: Draft Agenda for January Event

Cancer Engagement and Awareness Event

17th January 2019

13:00 – 17:00pm

The Kasaam Stadium, Grenoble Road, Oxford, OX4 4XP

Lunch	12:30 – 13:15
Welcome and Introductions	13:15 - 13:30
Cancer Care Reviews	13:30 – 13:50
Update on the QIS Project and QIS Toolkit Reminder	13:50– 14:05
Live Well Directory – Here for Health Service	14:05 - 14:20
Hope Programme / Hummingbird Centre	14:20 – 14:50
Tea / Coffee	14:50 – 15:10
The Odyssey Programme	15:10 – 15:30
CRUK – National Cancer Audit launch and Awareness Training	15:30 – 15:45
Macmillan Staff training offer	15:45 – 16:00
Gastro/Urology Referrals Q+A with the OUH Consultants	16:00 – 16:55
Thank you and Close	16:55 – 17:00