

**WE ARE
MACMILLAN.
CANCER SUPPORT**



NHS

NHS Improvement

National Cancer Survivorship Initiative

Prototyping Phase: Automated Surveillance...

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What Are We Trying to Achieve

- *improve the quality and effectiveness of service delivery and quality of life for those living with and beyond cancer*
- *not only adding years to live, but adding life to years*

Emerging Principles

- Risk Stratified pathways of care rather than one size fits all
- All those following a diagnosis of cancer should have a dynamic personal care plan which arises from an assessment of the disease, the treatment, and the individuals personal circumstances
- Information provision should meet individual needs and should be timely, accessible and promote confidence, choice, and control
- Individuals should be encouraged to self manage with support and rapid access to appropriate professional when problems arise

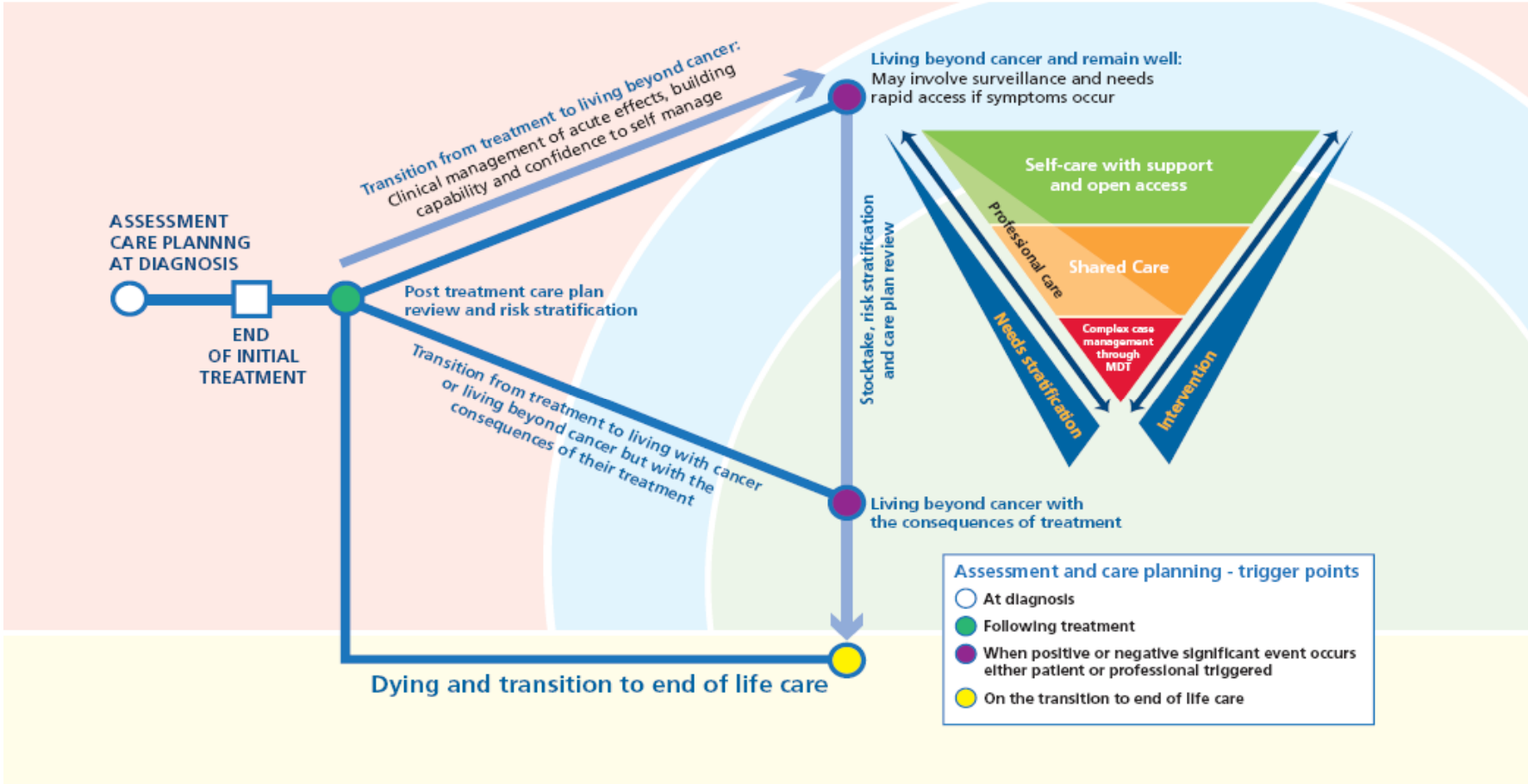
Purpose of prototyping

Overarching objective:

To develop principles for future practice through National pathways of care that can be rolled out across the NHS

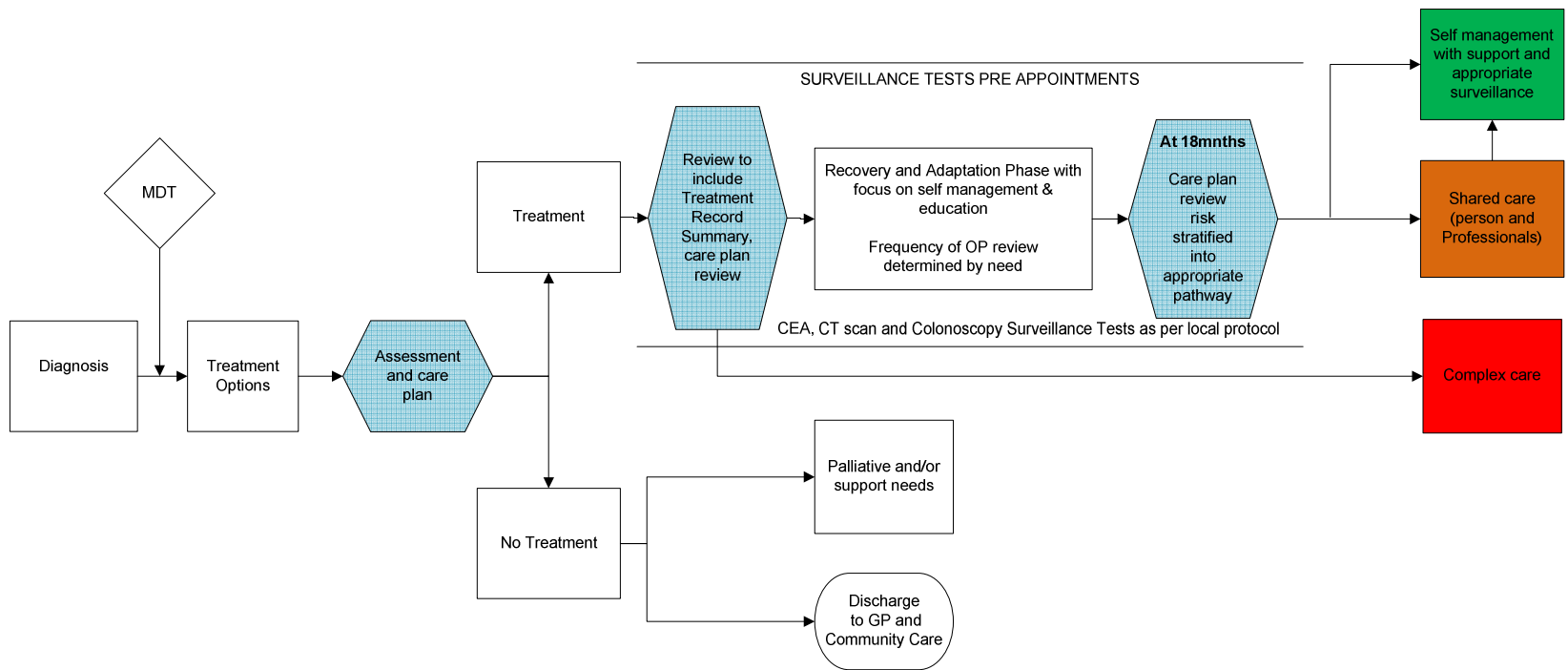
- To test models and pathways of care which reflect the nature of cancer survival
- Sites to deliver safe, effective services that bring a positive experience to patients and frontline staff
- Collaborative working across commissioning and provider services in health, local authorities, independent and voluntary sectors
- The focus will be on 4 tumour types; breast, colorectal, prostate, lung
- Sites may focus on one or more tumour sites

Model of Care: Living With and Beyond Cancer



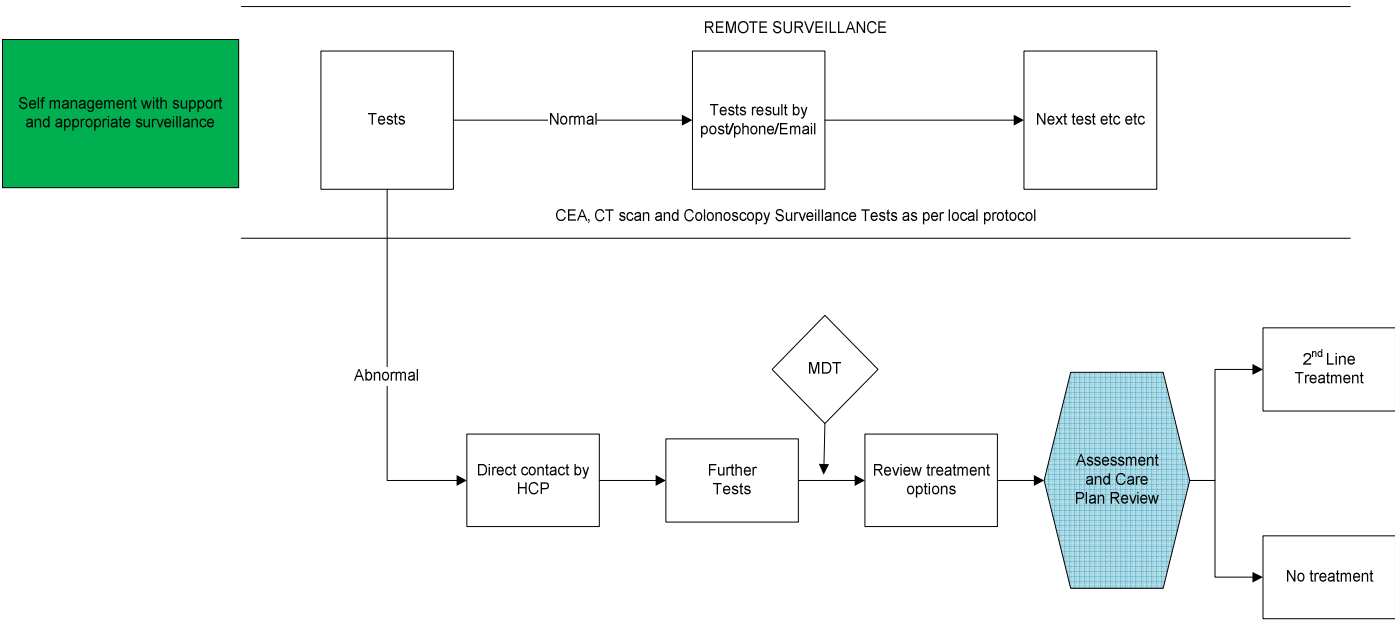
Generic Colorectal Care Pathway

Care Coordination



Self Management Colorectal Pathway

Care Coordination



Automated Surveillance Drivers For Change

- To improve the experience of aftercare for patients
- To reduce costs associated with unnecessary follow up visits
- To optimise the use of technology to support health care delivery

Automated Surveillance

Goal:

- To improve the effectiveness of follow up care through the development and testing of automated surveillance systems within Breast, Colorectal and Prostate Cancer

Scope:

- To monitor the health and well being of patients who have been risk stratified as being suitable for a supported self management model of care
- To develop a system that manages surveillance tests for appropriate patients within the following tumour groups
 - Breast – Mammography
 - Colorectal – CEA, CT Scans and Colonoscopy
 - Prostate – PSA

(frequency based on locally agreed protocols)

Milestones and Deliverables

- To define the specification for an automated surveillance system for Colorectal, Breast and Prostate cancer by November 2010
- To develop a solution/s that meet the specification (functionality and quality assurance) by March 2011
- To identify and address the key enablers for testing within prototype sites
- To establish systems for automated surveillance within appropriate prototype sites by May 2011 and evaluate the outcomes of testing by December 2011
- To produce a framework and solutions to enable national adoption and spread from December 2011