

Operational Guideline for Cancer Services

This document outlines the Operational Guideline for the Cancer Services Team; the guideline is reviewed every two years at a Cancer Services Team Meeting.

This Operational Guideline was agreed by the Cancer Services Team in May 2019.

Reviewed: December 2013
Reviewed: December 2014
Reviewed: September 2018

Reviewed and Amended by new Cancer Services Management Team May 2019.

Approved by – Cancer Board

Next Review: May 2021.

This is the most current document and should be used until a revised version is in place

Operational Guideline for the Cancer Services Team

Introduction

Within the Worcestershire Acute Hospitals NHS Trust, Cancer Services are managed by a multi-professional team.

The Cancer Services Team works closely with colleagues in other disciplines throughout the Trust to deliver patient-centred care. All members of the Cancer team work collaboratively with the individual Multidisciplinary Teams to ensure that suspected cancers are investigated and treated promptly and appropriately.

The Cancer Team links to the Cancer Alliance, CCG and STP.

The Cancer Team's role includes:

- Cancer awareness and early diagnosis
- Quality Surveillance and Improving Outcomes Guidance (IOG) compliance
- Living With and Beyond Cancer Agenda
- Governance
- Quality

The Cancer Team:

- Will run the Trust's Cancer Board monthly meetings.
- Lead, co-ordinate and facilitate the National Cancer Patient Experience Survey within the Trust, liaising directly with Quality Health who are commissioned by NHS England to deliver the survey nationally.
- Ensure the timely reporting of the national cancer waiting times targets to NHS Digital (national monitoring database) as required on behalf of the Trust and to be accountable for accurate monitoring and tracking of the patient pathway.
- Ensure timely submission to the national clinical audits and COSD.
- Lead on the national cancer quality surveillance programme of internal and external validations to ensure our cancer services are compliant.
- Deliver the Macmillan Cancer Information and Support Service across the Trust.
- Ensure professional leadership to the site specific CNSs.
- Support the individual MDTs on developing local cancer related pathways and guidelines.

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- Ensure there are mechanisms in place for the care of cancer patients to be formally reviewed by an MDT.
- Lead on the co-ordination for national quality surveillance programmes including uploading information on the national QSiS portal.
- Ensure arrangements are in place for a programme of continued medical and nursing education to include consideration of Advanced Communication Skills training and Level 2 psychological support.
- Be responsible for ensuring the Patient Tracking Lists are provided weekly to the hospital management teams and directorates to enable them to actively navigate the patient through the pathway and identify delays to pathways.
- Lead on the training and monitoring of the Somerset Cancer Register (SCR) and its use within cancer MDTs.
- Take part in the Trust's clinical governance activities which are related to cancer services and report to the Clinical Governance Group as needed.
- Engage with patients and users via the patient and public forum.
- Actively support operational teams in relation to specific patient complaints, business cases and other cancer related issues.

Operational Arrangements

The Lead Cancer Clinician for Cancer Services reports directly to the Trust's Medical Director and Chief Executive Officer.

Macmillan Lead Cancer Nurse professionally reports directly to the Chief Nursing Officer and has professional accountability for all Cancer CNSs within the Trust.

The Cancer Manager professionally reports to the Head of Elective performance and has professional accountability for the Cancer Services MDT team.

Cancer Services Structure

