NORCOM

North Derbyshire, South Yorkshire and Bassetlaw Commissioning Consortium

North Trent Cancer Network

North Trent Cardiac Network

North Trent Stroke Strategy Project

Work Plans 2011/12

The Work Programmes for Cancer, Cardiac and Stroke for 2011/12 have been developed and agreed through the Cancer, Cardiac and Stroke Boards and were ratified by NORCOM on February 11th 2011. They reflect the alignment and ownership of key priorities across the whole health community.

It was agreed by NORCOM that the programmes should be circulated to the provider trusts and PCTs in order that the agreed priorities could be included in the refreshed Operational Plans for 2011/12- 2012/13. It was also agreed that the work plans should be reported through each PCT and Provider Trust Board.

NORCOM agreed that the role of the NORCOM Clinical Networks and the Stroke Strategy Project would be crucial during the 2011/12 transitional period to maintaining and taking forward the collaborative development, improvement and commissioning of clinical services.

PCT and Provider leads are requested to include the priority areas identified from the work programmes within their local plans for 2011/12. A high level summary of the cancer priorities are at Appendix A and the Cardiac and Stroke priorities will be circulated once agreed by the Cardiac Board in April.

The work programmes are included for information.

Kim Fell Cancer Director

Clare Hillitt
Cardiac Director

Priorities for Cancer

Improving Outcomes: A strategy for Cancer (2011) describes the development of Cancer Service in England and builds on the Cancer Reform Strategy priorities. The Strategy recognises the importance of ensuring that health and social care are orientated towards delivering the improvements in outcomes for people with cancer.

The work programme reflects the full range of national priorities over the coming years. Cancer Board acknowledged that on the whole, the acute providers in North Trent generally meet the full range of requirements including the national Peer Review standards, waiting times and meet Improving Outcomes Guidance.

The following high level priorities were agreed:

- The population of North Trent has comparatively low one and five year survival rates
- Tackling late diagnosis by working with GPs, the Public and improving access to diagnostic tests where appropriate
- Good, timely clinical information underpins the National Cancer Strategy in terms of supporting patient choice and clinical improvement and outcomes. Implementing the Cancer Information Strategy will be crucial in supporting:
 - a) An understanding the role of choice and how this will be implemented in line with national guidance
 - b) The provision of good quality data reporting from each of the MDTs to the Cancer Registry in order to provide outcome information at all stages of the patient pathway
 - c) QIPP and the use of incentives
- Developing models of care for patients living with cancer that build on the ethos of self management and those developed for patients with long term conditions