

ROTHERHAM CANCER LOCALITY ANNUAL REPORT 2009

Rotherham has a population of 253,000 and approximately 3,500 people die in the borough each year. The commonest causes of death in the borough are, cardiovascular disease (including strokes), cancers and respiratory disease. Lung cancer remains the single most significant avoidable cause of death in Rotherham.

Smoking

Although smoking prevalence in Rotherham has decreased from 24% (2005) to 21% (2008) there are pockets of high smoking prevalence. NHS Rotherham has set out its tobacco control programme which being delivered through Rotherham Tobacco Control Alliance (RTCA). Key actions include increased investment in our local stop smoking service providers to increase the number of four week quitters from 2,300 to 2,550 per annum, implementing smokefree homes, promoting smokefree norms in our schools and colleges, social marketing, tackling illicit and smuggled tobacco and implementing local initiatives such as 'stop before your op' and the 'opt out' scheme for smoking pregnancy. We anticipate that our comprehensive efforts will reduce smoking prevalence in Rotherham from 21% to 18% by 2012. Reducing smoking prevalence and maximising the number of people who stop smoking will help reduce cancer health inequalities.

Cancer Waiting Times

Together NHS Rotherham and The Rotherham NHS Foundation Trust have been recognised as one of the top performers against the 2005 and 2008 cancer targets as illustrated below.

Target	Operational Standard	RFT Q4 2008/09
2WW	93%	91.61%
Old 31 day	96%	100%
Old 62 day	85%	92.50%
Breast 2ww (shadow monitoring)	93%	93.54%
New 31 day subsequent treatment		
Surgery	94%	100%
Drug	98%	100%
New 62 day screening	90%	100%
New 62 day Consultant Upgrade	TBC	100%

Where The Rotherham NHS Foundation Trust is not meeting the Breast 2WW target which goes live on 1st January 2010 this is solely due to patient choice in changing appointments.

Service quality

The national scheme of accreditation visits to monitor the quality of cancer services continues (peer review). Following the successful outcome of Rotherham's peer review visit in February 2008, the locality is preparing for a visit to its Gynaecology and Skin MDTs in June 2009. In addition, work is underway for the Breast, Lung, Upper GI and

Urology MDTs to undertake their self assessments ahead of their internal validation assessments later in the year.

Rotherham residents aged between 60 and 69 are now participating in the Bowel Cancer Screening Programme. Preparations are well advanced at the Rotherham NHS Foundation Trust for its JAG visit in August 2009. JAG accreditation of the Trust's Endoscopy Unit will enable Rotherham patients to have their screening colonoscopy at the Trust.

Rotherham NHS Foundation Trust is working closely to map unscheduled care. This has resulted in a project supported by NHS Rotherham funding to identify a system that will reduce unscheduled attendances of cancer patients at A&E.

A Macmillan Black Minority Ethnic worker based at Rotherham Hospice has taken up post recently to ensure that there was increased access to local services.

Welfare Benefits Rights Service

Macmillan have offered Rotherham the opportunity to develop a comprehensive Welfare Benefits Rights Service for Cancer Patients. Macmillan Cancer Support has provided £500k funding to establish this service through a unique partnership with Rotherham BT and NHS Rotherham. RBT are pleased to provide this critical service to Rotherham.

Cancer Action Rotherham

The Rotherham Cancer Users Forum has been developing their services over the past year through the support of NHS Rotherham. The Forum has undertaken a re-branding/marketing of their services. They are now known as 'CAR' Cancer Action Rotherham and are working to establish a website. CAR as voluntary Forum continue to play an active role in promoting users and the general public's needs locally in developing and delivering cancer and end of life care services. The whole premise of the work was to consider how a committed group of people could bridge the gap between professionals and systems, and represent the unheard voice of the majority of cancer patients. Key in this work was the understanding that the majority of people experiencing cancer find ongoing engagement problematic, due to physical, emotional and medical needs. For many Cancer is still a taboo, especially among some communities, age groups, and to some extent for men. The nature of some cancers can make engagement harder, for example, those considered "intimate" or those resulting in scarring and disfigurement. It became clear that it was paramount to find ways to link support groups and mechanisms, and informal networks to planning and quality mechanisms, in a way that was accessible for as many people as possible.

Structures are now in place to enable the influence of decision makers in both formal and unplanned situations; to create and enhance relationships with the right people who can provide, use or hear information from service users, and to build a wide network of service users who feed information into Cancer Action Rotherham. To date, work has involved and is being planned around.

Local Chemotherapy

Rotherham NHS Foundation Trust continues to work towards establishing further local chemotherapy services for patients with Colorectal, Lung and Breast cancer. In the past year local chemotherapy services have expanded for Breast and Colorectal patients with services for Lung cancer patients expected to be established in 2009/10. In addition a Lead Oncologist has been appointed and the hospital is working to establish a comprehensive acute oncology service supported by a robust governance framework.

End of Life Care

In Rotherham around 60% of adult deaths currently occur in hospital and 15% in Care Homes. This is in contrast to national research that has concluded that over 50% of the population would prefer to die at home. Locally, the number of people in Rotherham over 85 will increase by 80% between 2008 and 2025, (from 5200 to 9360). As a result, people approaching the end of their life require a combination of health and social care services provided in the Community, Hospitals, Care Homes, or Hospices. Recognising this, NHS Rotherham has developed an End of Life Care Strategy (EOLC) that sets out the local vision for end of life care that is personalised, well coordinated and enables real choice for all patients with active, progressive and advanced disease, irrespective of their diagnosis. Thus NHS Rotherham has set a transformational initiative to reduce deaths in the over 65 age group to the national average by 2012 through increasing patient choice

Furthermore NHS Rotherham acknowledges the rights of individuals to be involved in discussions about their own healthcare and to be given the information to enable them to make decisions and enable choice¹. As a priority area NHS Rotherham will ensure through the commissioning process providers train all clinical staff in end of life care. Key service developments that have occurred over the past year in local end of life care services are outlined below:

NHS Rotherham is one of only twelve national areas to work alongside the national Gold Standards Framework Team to establish the only national recognized accreditation system for Care Homes to deliver end of life care. The aim is for all Rotherham Care Homes to be accredited to this national standard by 2012.

NHS Rotherham will continue to work with General Practitioners and community services to further develop local end of life services through the national Gold Standards Framework scheme.

NHS Rotherham is working to establish a comprehensive integrated 'Hospice at Home' service that offers real choice for users with a single point of access. The 'Hospice at Home' service will be developed to ensure that it is accessible to those with a life limiting illness in the end stage of their lives, with variable care options based on need.

Funding for a second Palliative Medicine consultant has been agreed and will soon be employed.

NHS Rotherham has invested two million pounds in developing Rotherham Hospice services. This will result in the capacity of the Hospice in patient unit being expanded

¹ NHS Constitution, Section 2a, DOH, Jan 2009

from eight to fourteen beds in 2010. This service expansion scheme will ensure there is no mixed accommodation and users will have single room accommodation.

Working with LINKS & the Patient Public Involvement team at NHS Rotherham a consultation with the general public on the EOLC strategy is planned to take place in May 2009. A Camper Van with video booth, funded and supported by LINKS, will travel to various locations across the district through the headline; 'at the end it matters'....'it everyone's business'

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