

Ultrasound planning cuts hospital stay by half for brachytherapy patients

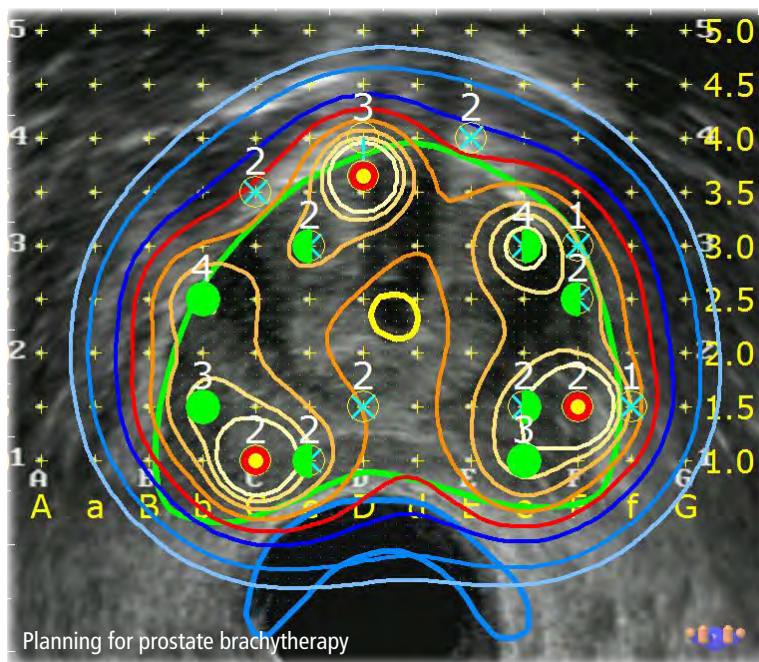
Ultrasound planning has reduced the in-patient stay from four nights to two for prostate cancer patients who undergo brachytherapy at the Royal Devon and Exeter Hospital.

A £100,000 investment in the Swift system means men are now being admitted on Monday, having their treatment planned and delivered on Tuesday, and going home on Wednesday.

Previously, with CT planning, patients had to stay in hospital from Monday to Friday, with treatment split between Wednesday and Thursday. They also faced two uncomfortable nights in between, with tubes protruding from their perineum.

The key to the advance is that the ultrasound images of the prostate are more accurate and delivered more quickly.

The planning of the brachytherapy



can then be done within the hour on the Tuesday morning, enabling the first dose of therapy to be given very rapidly.

Although there must still be a five-hour gap before the second dose of therapy, this can still be given late in the afternoon.

Consultant Oncologist Anna Lydon and Consultant Urologist Malcolm Crundwell believe the RD&E is the first hospital in the country to carry out both ultrasound planning and all treatment the same day.

The Swift system was purchased last October with a legacy. It has been operational since February, and is now being used for two or three patients per month.

Anna Lydon said: "The Swift system means we can speed up the whole process. The patients all like to be able to go home so quickly, and without having to spend a couple of uncomfortable nights with tubes sticking out.

"They tolerate it very well and without complications. It's too early to tell if what we're doing is better in terms of getting rid of the cancer, but it doesn't give patients problems in the short term."

Welcome to the new-look newsletter

Welcome to the new-look Network News, with its quarterly updates from the Peninsula Cancer Network.

Websites and email addresses should all be clickable, giving instant access to further information or to the people involved.

Please do let us know of important developments within the cancer field, so we can incorporate them in future editions.

You can send ideas or contributions to me at West Yarnar (see back page).

David Chambers
Director

Clinical reviews this autumn for gynaecological and head and neck cancers

Peninsula-wide upper GI surgical centre on track for January start

Implementation work is well under way for Derriford Hospital to become the sole specialist centre for upper-gastrointestinal cancer surgery from January 2010.

The main focus has been on creation of a single multi-disciplinary team, operational from November. Work is also under way on a draft quality account for agreement and sign off against the service specification.

The quality account will detail compliance with national standards, clinical outcome measures, patient measurement of quality and patient safety indicators.

PCT boards agreed the centralisation this summer, after none of the five council Overview and Scrutiny Committees had decided the proposals constituted a substantial service change.

PCT decisions were based on the recommendations of independent clinical reviewers from outside the area and on the responses from stakeholders.

Similar clinical reviews are planned for later this year to inform decisions on the creation of second specialist surgical centres for both gynaecological and head and neck cancers. The gynae review is due to start on 14 September and the head and neck review on 30 November.

Exeter is already operational as a specialist centre for both types of cancer, leaving the choice of second centre in each case between Plymouth and Truro.

There are some 230 new cases of head and neck cancer each year across the Peninsula. Some 650 gynaecological cases require surgery, of which 550 would need to go to the specialist centre.



The new Terence Lewis Building at Derriford, which will house the upper-gastrointestinal centre

RD&E health info team move to new home

The Health Information Centre at the Royal Devon and Exeter Hospital (Wonford) has moved to a new location within the main concourse.

Trained staff are available to help patients, relatives and visitors find out more about health conditions in an informal setting.

Two computer provide access to NHS-accredited health sites. The information can then be printed off, for people to take home with them. There is also a new machine so people can check their body mass index.

For those who cannot call in, staff are happy to send out information in the post. Tel: 01392 402071.

Date set for research symposium

The 10th Annual Research Symposium will be held on 7 May 2010 at Dartington Hall, Dartington, near Totnes, Devon, with Peter Donnelly leading the day. The symposium has proved to be the principal research meeting for the regional oncologists, and we have already received considerable interest from the oncological fraternity.

Please contact Ann Courtman on 01803 860660 or email ann.courtman@nhs.net to reserve your place.

Swine flu delays primary care event

The primary care event planned for Roadford on 18 September has been postponed to 26 February 2010, due to the anticipated impact of swine flu on the availability of primary care colleagues. It is hoped that the 2010 programme will be similar in content.

Revamped communication skills course helps clinicians get connected

'Connected' is the new name for the national communication skills programme, which incorporates the best of a number of previous programmes. The three-day course is based on experiential learning, using actors to enable intensive role-play.

Since last October, the PCN has run 10 courses around Devon and Cornwall, generating a huge amount of positive feedback, which we hope will be reflected through patient experience exercises in the future.

Although this course has been particularly difficult to co-ordinate and resource at local trust level, the

comments from clinicians show how much they value the experience.

There are now three fully-accredited facilitators, with another seven in training, which will help us run the programme more economically in future.

Seven further courses are planned in 2009; all are fully booked. We are looking at further dates and venues, while waiting for finance to be confirmed for 2010/11.

If you would like to register your interest in attending a Connected course in the future, please contact your Lead Cancer Nurse.

What they said: Feedback from clinicians

- "I am very pleased (surprised even!) by how much I have learned on this course – thank you"
Macmillan Radiographer
- "The course exceeded my expectations of what I could take away with me, and how relevant it was to my job"
Lead Specialist Nurse
- "I will feel much more confident in breaking bad news to a family well known to my colleagues but not well known to me"
Associate Specialist

Partnership Group to reform with stronger local links

The PCN's Partnership Group, which draws members from local patient and carer groups across Devon, Cornwall and the Isles of Scilly, decided unanimously to disband at its meeting on 21 July.

Members felt that the group was no longer viable. Instead, they decided it should be reconstituted with more active representative from the hospital trusts and stronger links with local organisations and patient groups.

The next step will be an open event for people interested in helping to shape cancer services, to be held at Holne Park, Ashburton, on 28 September.

Different ways of working will be discussed, with a view to strengthening the input of patients and carers.



In the meantime, patient representatives will continue to sit on the series of smaller groups that the Peninsula Cancer Network runs for each type of cancer and for broader issues such as chemotherapy and imaging.

Fiona Halstead, the patient representative from Devon who chaired the Partnership Group, said: "The group has played its part, but it was becoming clear that we needed to overhaul the way we operated, to be as effective and representative as possible.

"This is a big opportunity to build on what the group has done by looking at different ways of working, including the sorts of models used in other cancer networks.

"I hope people with experience of cancer from across Devon, Cornwall and Scilly

will consider coming along to the event on 28 September, so they can help make a difference for others."

At its final meeting, the Partnership Group mandated Fiona Halstead and Vice Chair Martin Rider, along with staff from the Peninsula Cancer Network, to reconstitute the group with a view to:

- Enhancing user representation within the acute trusts' cancer services decision-making processes
- Encouraging each trust to ensure that it was appropriately and consistently represented within the Partnership Group
- Ensuring that the Partnership Group was well-represented within the Network's strategic decision-making process

MORI survey: Three-quarters of people prepared to travel for best outcomes from cancer treatment

Survey and interview work commissioned from Ipsos MORI by the PCN shows that around three-quarters of people in Devon, Cornwall and the Isles of Scilly would be prepared to travel further to get the best-possible outcome from cancer treatment.

The figure varies little between the four primary care trust areas:

- 71% in Cornwall and Isles of Scilly
- 78% in Devon
- 79% in Plymouth
- 76% in Torbay

There is also no significant variation between people with experience of cancer in the past two years – involving either themselves or a close family member – and those without. In Cornwall, for example, two-thirds (66%) of people with recent experience of cancer say they would be willing in principle to travel further.

The research was designed to find out about readiness to travel further for better outcomes for rarer cancers; what concerns people might have about doing so; and how patients and families might be helped if any changes were ultimately made.

The findings have been shared with Overview and Scrutiny Committees, and were taken into account by the four PCTs when agreeing proposals for the centralisation of upper-gastrointestinal (UGI) surgery at Derriford Hospital.

Ipsos MORI's research involved a telephone survey of 1,003 people, face-to-face interviews with patients, carers and people in 'hard to reach' groups, and three-hour evening events at five locations, each involving 20 members of the public to look in detail at the issues.

Overall, only 29% of people across Devon, Cornwall and Scilly were aware of the UGI reconfiguration proposals and, of those, three quarters said they knew just little or hardly anything about the potential changes (75%). This was despite "considerable media attention".

The research also found many misconceptions, with one of the most common being that proposals were for cancer services as a whole to be centralised, rather than just the surgery for some rarer cancers.

Among MORI's conclusions were that:

- Lack of knowledge about the proposals meant that "people's instinctive reactions towards the proposals are negative: change is not particularly welcome, and is commonly put down to cost savings – findings that are often associated with change programmes".
 - The principles behind the proposals – travelling further for better outcomes – appeared to be supported.
 - Many people felt they knew others who wouldn't support the principles, and "struggled with the idea that choice could not be offered".
 - People were concerned about issues such as loss of choice, travel and accommodation, continuity of care and information, loss of skills from local hospitals, overloading the hospital infrastructure and rises in waiting times, and the validity of statistics.
 - Similar support for relatives visiting their loved ones, focusing on issues such as transport, parking and its cost, accommodation and relaxed visiting times
 - Comprehensive travel plans showing what was available
 - Plans for contact between patients, local doctors and the central surgical team
- However, people also put forward a range of ideas to help make centralisation work as well as possible. For example:
- Help with travel and accommodation, focusing on issues such as financial support, public transport and taxi services

The report added: "Both the concerns and the mitigations found during this research show that whilst most support the principle of travelling further for improved treatment and outcomes the same people also have very real trepidations that need to be addressed should reconfiguration be implemented."

Copies of the report are available from the PCN office.
Email: karen.ford2@nhs.net





Teresa Moss, Director of the Cancer Action Team, has been appointed Director of National Specialised Commissioning, where she will be responsible for commissioning services for the rarest conditions.

Stephen Parsons, head of the National Peer Review Programme, has agreed to cover her role until a new appointment is made by Mike Richards and Department of Health.

Steve Smith is standing down as Medical Director and Director of Cancer Services of South Devon Healthcare NHS Foundation Trust after over 12 years in the role. **John Lowes** has been appointed as Medical Director, with the new Director of Cancer Services yet to be announced.

Martin Cooper is now Medical Director at the RD&E. **John Renninson** replaces Martin as the Director of Cancer Services at the Trust.

James Palmer, Medical Director

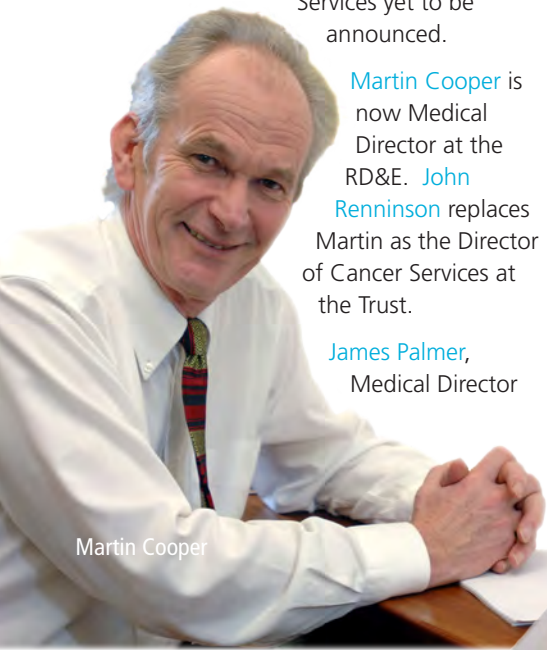
at Plymouth Hospitals, has been appointed Clinical Lead for the South West Specialised Commissioning Group.

Andrew McLennan, Consultant Oral & Maxillo-facial Surgeon at the RDE, is the new Chair of the Network Head & Neck SSG.

Tony Gray has arrived from Devon PCT to manage the PCN's communication work.

Glen Everton continues to look after the upper GI, gynaecological and head and neck reconfigurations.

Mark Rawles is covering for **Amanda Nadin** as the PCN's Patient Information Manager. Amanda is on maternity leave.



Martin Cooper



Mark Rawles

Revamped website due for autumn launch

The revamped PCN website should be going 'live' this autumn. It will provide easy to access information for professionals across the peninsula with, for example, site specific group minutes and agreed guideline information for all network members.

Patients and carers will also be able to access the website to obtain straightforward information and signposting to other relevant sites.

The PCN site will be hosted by Torbay Care Trust.

New funding helps Peninsula reach top three for research

The high number of patients being entered into cancer trials in Devon and Cornwall has put the Peninsula in the top three among the 33 national cancer research networks.

Overall, 1,020 local patients participated in more than 79 studies during 2008/09

The new 'Flexibility and Sustainability' funding stream, introduced in 2008/09, has provided additional support to urology trials in Exeter and Plymouth and to radiotherapy and gynaecological cancer trials in Truro.

Plans are already in place to support additional surgical breast and colorectal trials and lung cancer trials in 2009/10.

These developments provide support for new investigators, further strengthening our trials portfolio and increasing the opportunity for our patients to participate in key national trials.

A good collaborative working relationship has been established with the Peninsula

Comprehensive Local Research Network. We are working together to address potential blocks to our ambition to further increase our trials activity.

Additional funding has been allocated to provide support to services such as imaging, pharmacy and pathology, which are vital to cancer trials.

The Torbay Cancer Trials team have recently moved to a purpose-built research base in the innovative new Horizon Centre at Torbay Hospital, which brings together innovation, education and research in healthcare under one roof.

We are also looking forward to the relaunch of the PCN website, so we can provide more information about the work of our cancer research teams to all interested stakeholders (see above).

Glyn Rees
Peninsula Cancer Research Network
Manager

Training courses

Effective Communication in End-of-life Care

Introductory workshop

Structure

This course is open to all staff and volunteers working in a palliative care and end-of-life care setting, who come into contact with patients and their relatives.

The course will cover such topics as bereavement – what to say, what not to say, dealing with difficult and emotional situations, dealing with difficult questions, effective listening skills and looking after yourself.

Led by the Communication Skills Training Team – St Luke's Services

Date: Tuesday 1 December 2009

Time: 9.30am–1pm

Venue: Jennycliff Room, St Luke's Hospice, Stamford Road, Turnchapel, Plymouth, PL9 9XA

Cost: £20

Effective Communication in End-of-life Care

An intermediate level workshop for multi-disciplinary health care assistants

Structure

Through group-led interactive role-play, the workshop allows time to focus on strategies for dealing with emotional/difficult situations and to explore individuals' attitudes, beliefs and avoidance behaviours.

By the end of the workshop the participants will:

- Have developed their confidence and skills in communicating with patients and families around end-of-life issues (dealing with anger, breaking bad news, handling difficult discussions and promoting openness)
- Demonstrate an understanding of the theories behind effective communication

Provides learning relevant to NHS KSF (DOH 2004) dimensions:

- C1 Communication L2
- HWB4 Enablement to address Health & Wellbeing Needs L2
- HWB5 Provision of Care to Meet Health & Wellbeing Needs L2

Led by the Communication Skills Training Team – St Luke's Services

Date: Tuesday 15 September 2009

Time: 9.15am–4pm

Venue: Jennycliff Room, St Luke's Hospice, Stamford Road, Turnchapel, Plymouth, PL9 9XA

Cost: £45 (lunch included)

Effective Communication in End-of-life Care

An intermediate level workshop for non-clinical staff whose role involves interaction with patients and families

Structure

The facilitators will role-play scenarios, encouraging interaction to allow the group to focus on strategies for dealing with emotional/difficult situations and to explore individuals' attitudes, beliefs and avoidance behaviours.

By the end of the workshop the participants will have:

- Developed their confidence and skills in communicating with patients and families around end-of-life issues (dealing with anger, handling difficult discussions and promoting openness)
- Explored ways to cope with their own emotions and self-care
- Gained an understanding of the theories behind effective communication

Led by the Communication Skills Training Team – St Luke's Services

Date: Thursday 1 October 2009

Time: 9.15am–4pm

Venue: Jennycliff Room, St Lukes Hospice, Stamford Road, Turnchapel, Plymouth, PL9 9XA

Cost: £45 (lunch included)



For further information or to book any course, please contact Marilyn Prowse or Paula Hine.

Tel: 01752 401172

Address: Education Department, St Lukes Hospice, Stamford Road, Turnchapel, Plymouth, PL9 9XA

All cheques payable in advance to St Luke's Hospice

Foundations in Palliative and End-of-life Care

A multi-disciplinary, three-day programme for healthcare assistants/support workers working with patients and their families at the end of life, in all care settings

Course aims:

- Develop an understanding of the principles & ethics of caring for those with life-limiting conditions
- Discuss national guidelines & strategies
- Gain knowledge of the physical, psychosocial, spiritual and cultural-management needs of patients & families
- Explore communication skills required to support patients & families with end-of-life & emotional issues
- Learn about the Liverpool Care Pathway
- Raise the importance of self-care & reflective practice

Knowledge can be used for NVQ III or equivalent Foundation Level 3; provides comprehensive learning towards KSF dimensions:

- C1 Communication L2
- HWB2 Assessment & Care Planning L2
- C2 Personal & People Development L2
- HWB4 Enablement to address health & Wellbeing Needs L2
- C5 Quality L2
- HWB5 Provision of Care to Meet Health & Wellbeing Needs L2
- C6 Equality, Diversity & Rights L2
- HWB7 Interventions & Treatments L2

Dates: 6, 7 & 8 October 2009

Time: 9.30am–4pm

Venue: Jennycliff Room, St Luke's Hospice, Stamford Road, Turnchapel, Plymouth, PL9 9XA

Programme cost: £135 (lunch provided)

The Management of Lymphoedema in Life-limiting Conditions

Structure

This multi-disciplinary workshop will explore the principles of lymphoedema care in the palliative setting to include management of skin care, Lymphorrhoea, cellulitis, support garments and psychological impact

It provides opportunity for learning relevant to the following KSF dimensions:

- HWB2 Assessment & Care Planning L2/3
- HWB4 Enablement to Address Health & Wellbeing Needs L2
- HWB5 Provision of Care to Meet Health & Wellbeing Needs L3
- HWB7 Interventions & Treatments L2

It is therefore appropriate for both registered and unregistered clinical staff

Facilitated by Vickie Mathias, Lead Lymphoedema Therapist

Date: Wednesday 14 October 2009

Time: 9am–1pm

Venue: Main Meeting Room, Pearn Egguckland Road, Mannamead, Plymouth

Cost: £20

Promoting Quality End-of-life Care for Patients and their Families/Carers

A multi-professional, three-day specialist palliative care programme

Structure

- Are you a registered HCP?
- New to palliative/end-of-life care?
- In need of an update/refresher?

...then this is the programme for you

This is an opportunity to:

- Assess your learning needs
- Understand national/local strategy/initiatives & guidelines
- Update your symptom-management knowledge & skills

Provides a comprehensive range of learning relevant to the following NHS KSF dimensions:

- C1 Communication L2/3
- C2 Personal & People Development L3
- C4 Service Development L2
- C5 Quality L2/3
- C6 Equality, Diversity & Rights L2/3.
- HWB2 Assessment & Care Planning L2/3,
- HWB5 Provision of Care to Meet Health & Wellbeing Needs L3
- HWB4 Enablement to address Health & Wellbeing L3

Dates: Tuesday 3 November 2009, Tuesday 8 December 2009 & Tuesday 12 January 2010

Time: 9.30am–4pm

Venue: St. Luke's Hospice, Stamford Road, Turnchapel, Plymouth, PL9 9XA

Programme cost: £135.00 (lunch provided)

The PCN team

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| Wendy Maunder | RD&E | Tel: 01392 406904 Email: Wendy.Maunder@rdefn.nhs.uk |
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