Training staff for the future of cancer care: What should we do differently?

Jeremy Levy, Clinical Lead for HEE in NW London
What does the National Cancer Strategy: Achieving World Class Cancer Outcomes mean for the education and training of nurses and allied health professionals (and others) working across the cancer pathway, including primary, secondary and tertiary care, community care and hospices....
Health Education England

to deliver a better healthcare workforce

• Health Education England (HEE) exists for one reason only:
• to support the delivery of excellent healthcare and health improvement to the patients and public of England by ensuring that the workforce of today and tomorrow has the right numbers, skills, values and behaviours, at the right time and in the right place
HEE in NW London: local partners

- Over 2 million residents
- 54,000 NHS staff
- 6 Higher Education Institutes
- 11 Acute Providers
- 2 Community Providers
- 2 Mental Health Providers
- 450 General Practices
- 4,000 medical and non-medical trainees
- 1 Vanguard, 1 STP
Other key local partners

Potential advantages in NW London

- NWL CLAHRC (*collaboration for leadership and applied health research and care*)
- Imperial Academic Health Science Centre (AHSC)
- Imperial Partners Academic Health Science Network (AHSN)
- Joint working of CCGs “Shaping a Healthier Future” now in the form of 1 STP
- National Cancer Vanguard
Key local priorities

- “Shaping a Healthier Future” / STP
- Seven day working
- Mental health service transformation
- Dementia awareness
- Expansion of GP training
- Bands 1-4 development strategy
- Emergency care and urgent care pathways
- Primary care and community workforce
- End of life care and cancer care pathways
- Public health issues
Overview of HEE NWL’s engagement and support

Workforce planning for transformation

• Aligning the HEE workforce and education planning processes to ensure that investment in the workforce supports the future service vision for North West London

• Significant investment in the development of General Practice teams and the establishment of GP delivery and community learning networks

• Managing the process of moving pre-registration learners and postgraduate doctors in training

• Investment in the Change Academy to support the development of integrated care teams and services
**Shaping a Healthier Future** - In North West London we have one of the most ambitious visions for health and care transformation in the country; outcome based integrated health and care centered around the citizen...

- **Hospital reconfiguration programme**
  - Improved hospitals delivering better care 7 days a week, more services available closer to home

- **Whole Systems Integrated Care programme**
  - Multi-disciplinary Care co-ordinated around the patient, led by the GP

- **Primary Care transformation programme**
  - Better out of hospital services, greater access to GPs at convenient times and locations 7 days a week

- **Self management**
  - People are empowered to manage their own wellbeing and health

[www.nwl.hee.nhs.uk](http://www.nwl.hee.nhs.uk)
How do we ensure people and carers are involved throughout?

This chapter is important because it explains what we mean by Embedding Partnerships and why this is crucial to the success of making joined-up, person-centred care a reality for the people of North West London. This chapter speaks from the voice of the lay partners, who have played a central part in the co-design of all elements of this toolkit.

Section 1: Introduction

Section 2: What was our approach to the co-design phase?

Section 3: Why is Embedding Partnerships important?

Section 4: How can we support lay partners?

Section 5: How can we co-produce effectively with lay partners?

Section 6: What is the impact of coproducing with lay partners?

http://integration.healthiernorthwestlondon.nhs.uk/
Cancer education is not just “cancer”

- Learn from other activities undertaken already
- Educate the existing (trained) workforce ..
  - How to engage / co-produce with patients
  - Making every contact count
  - How to enhance in education primary care
Achieving World-Class Cancer Outcomes: Taking the strategy forward
Introduction

This plan is structured according to the six strategic priorities from the Cancer Taskforce report, which have determined the six key workstreams for the implementation programme:

- Spearhead a radical upgrade in prevention and public health
- Drive a national ambition to achieve earlier diagnosis
- Establish patient experience on par with clinical effectiveness and safety
- Transform our approach to support people living with and beyond cancer
- Make the necessary investments required to deliver a modern, high-quality service
- Ensure commissioning, provision and accountability processes are fit-for-purpose

We can achieve the very best cancer outcomes for everyone in England, with patients and clinicians driving the transformations we need to see. I look forward to working with you all to deliver this important programme to benefit all cancer patients in England.

Cally Palmer CBE
National Cancer Director
World class cancer outcomes: strategy

- The current workforce will make the immediate difference in improving the quality of cancer care for patients.
- HEE will rapidly baseline the current status of cancer and related workforce to identify gaps ....
- Development and assurance of the future workforce will be paramount to a sustainable high quality service.
- Work is already underway to build capacity to meet the nearer term demand for diagnostics... ensuring sufficient numbers of sonographers, radiographers, radiologists.
World class cancer outcomes: strategy

- HEE is expanding training of non-medical endoscopists to train a total of 200 by 2018.
- HEE is working with partners to ensure staff have the communications skills to provide compassionate care for patients, and their carers and families.
- HEE we will work with partners to develop curricula to ensure future professionals have those skills, and also the ability to realise advancements in technology and genomics.
Future of Cancer Prevention Research

AACR 2016 report

• Remarkable developments in genomics, eg single-cell sequencing, “Pre-Cancer Genome Atlas”

• Trials of chemopreventives informed by precision medicine, eg in familial adenomatous polyposis;

• Genomic markers for early detection of colon and lung cancers, & promising leads for pancreatic and ovarian cancers - liquid-biopsy technology and big-data;

• Efforts and challenges in implementation science to increase usage of proven approaches eg HPV vaccines
# Course highlights

<table>
<thead>
<tr>
<th>Course</th>
<th>Academic credits and level</th>
<th>Duration</th>
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<tbody>
<tr>
<td><strong>BSc (Hons) in Supportive and Palliative Care</strong></td>
<td>120 credits at level 6</td>
<td>2–5 years</td>
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<tr>
<td><strong>MSc in Cancer Care: Advanced Practice</strong></td>
<td>180 credits at level 7</td>
<td>3-5 years part-time</td>
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<tr>
<td><strong>Motivating Patients for Self-Management</strong></td>
<td></td>
<td>3 days</td>
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<tr>
<td><strong>Postgraduate Certificate in Cancer Care</strong></td>
<td>60 credits at level 7</td>
<td>2–5 years</td>
</tr>
<tr>
<td><strong>Chemotherapy in Cancer Practice</strong></td>
<td>15 credits at level 6</td>
<td>5 days</td>
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<tr>
<td><strong>Advanced Communication Skills Training</strong></td>
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*Who is it for?*
- Health and social care practitioners
- Senior healthcare professionals (Band 6 and above)
MSc, PG Dip and PG Cert in Genomic Medicine

MSc, PG Dip and PG Cert Genomic Medicine
Current activity from HEE NWL

• “Difficult conversations” – training rolled out to all 8 CCGs to all trusts and primary care
• Harrow CCG: investment into a “PIE” – partnership in innovative education providing education around end of life care across hospital staff, hospices, primary care AND nursing homes AND London Ambulance
• Investment into LAS for directed multiprofessional training on end of life issues
Current activity from HEE NWL

For example: TalkLab: better conversations

- [http://talklab.nhs.uk/82559638/videos](http://talklab.nhs.uk/82559638/videos)
Overview of HEE NWL’s engagement and support

Priority professions identified

- GP Practice Nursing
- Community Nursing – to support expansion of community care
- Mental Health Nursing – to support expansion in Community settings
- HCAs and generic health workers – for all settings
- Physician’s Associates – in a range of service settings such as EM, elective and Primary Care – 50 American PAs being recruited for NWL as part of the national expansion project
- Care Liaison workers – to support Whole Systems integration & GP
- Occupational Therapists – focussed community-based training
- Physiotherapists - focussed community-based training
- Neonatal Nurses – to boost supply of registered nurses
The future of cancer education?
Analysis

Rethinking diagnostic delay in cancer: how difficult is the diagnosis?

*BMJ* 2014; 349  doi: http://dx.doi.org/10.1136/bmj.g7400 (Published 10 December 2014)
Cite this as: *BMJ* 2014;349:g7400

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*Georgios Lyratzopoulos, Jane Wardle,* and *Greg Rubin* argue that delays in referral for suspected cancer are unlikely to be caused by poor professional performance and explore other potential causes and strategies for improvement.

The timely diagnosis of cancer is a frequent theme in the lay press and an increasingly common topic for quality improvement initiatives.1 2

The UK’s health secretary has advocated ranking general practices on the NHS Choices website according to how promptly patients subsequently diagnosed with cancer are referred to specialist services for suspected cancer.3 But is such a policy based on evidence? Its main assumption is that the multiple visits made by these patients to primary care before referral chiefly reflect poor professional performance rather than factors such as clinical complexity, reasonable watchful waiting, or the need for appropriate investigations in primary care. We review the
The future of cancer education

• How to support prevention – MECC/teachable moments – widely across professional groups
• Key underlying understanding of the science, genomic & personalised medicine, and also innovation and QI
• Some specific professions eg endoscopists, radiographers, radiologists,
• Integrated working and cross team working eg therapists, community nurses, pharmacists, and learning out of silos
• The public ...
Population lifestyles present significant risks to health.

- 70% of the adult population are inactive
- 21% smoke
- 26% are obese
- 70% do not eat the recommended amounts of fruit & vegetables
- 27% of men drink more than recommended safe limits of alcohol
- 18% of women drink more than recommended safe limits of alcohol
What killed Amy Winehouse?

1. drug overdose

2. alcohol overdose

3. both the above
Amy Winehouse's death due to acute alcohol poisoning

Despite being “in recovery”

Why not use this to inform people of the harms of alcohol?

Blood alcohol 450mg/%
= 5.5 x legal driving limit
Drug related deaths - UK

Wear comfortable shoes

Eat real food

Smile

Have a glass of wine with dinner

Avoid vitamins and supplements

Never skip breakfast

Don’t smoke

Take aspirin

Grow a garden

Eat more fish

Exercise

How to stay healthy