

Sunderland Scrutiny Committee Update: Breast Care Services

Wednesday 21st October, 2015

1. Introduction

This report is from Sunderland Clinical Commissioning Group for the Sunderland Scrutiny Committee. It describes current arrangements for patients who need breast care services and the process for the future commissioning of these services. Patient safety and quality of care are the fundamental principles for decision making by Sunderland Clinical Commissioning Group (SCCG) and City Hospitals Sunderland (CHSFT).

2. Background

In December 2014 SCCG and CHSFT stopped new patients needing breast care services being referred to CHSFT. The decision was made jointly for patient safety and quality reasons due to the loss of breast care consultants at CHSFT. Since December 2014 any new patients needing breast care services have been referred to other hospitals in the north east. These referrals are made using the “e-referral system” (formally Choose and Book).

Since December 2014 SCCG and CHSFT have worked together to ensure the continued care for existing breast care patients. CHSFT has worked closely with Newcastle-upon-Tyne Hospitals NHS Foundation Trust (NUTHFT) to maintain safe clinical care for patients.

The preferred model of care for patients requiring breast care services is a high quality “one stop” assessment unit for all new patients. This is a model of care that is widely available in the UK and the one that SCCG wish to commission for the population of Sunderland. Since December 2014 SCCG have been trying to secure this service. Plans were in place to develop a breast care service jointly between CHSFT and NUTHFT. Unfortunately as a result of unforeseen changes in NUTHFT it has not been possible to implement these plans.

The majority of new patients from Sunderland who require breast care services are now being assessed at Gateshead Hospitals NHS Foundation Trust (GHFT). Some patients are also being assessed in Durham and Newcastle hospitals.

3. Current Position

SCCG is working hard with local hospitals to ensure the continued availability of breast care services for the population of Sunderland. SCCG, CHSFT and GHFT

are working together to ensure the provision of high quality, safe and accessible breast care services.

Short term (now):

- Patients with a care plan, from before December 2014, will continue to be treated at CHSFT. This includes care and support from the breast care nursing team, who are based in Sunderland one day per week in addition to a five day dedicated telephone service.
- CHSFT will continue to care for their existing patients via a consultant-led multi-disciplinary team (MDT), with NUTHFT providing oversight and clinical support when needed.
- Patients who need a referral for breast care services will continue to get assessment appointments in north east hospitals using the “e-referral system”. If subsequent treatment (e.g. chemotherapy) is required patients will be receive this in Sunderland when this is clinically appropriate and their choice.

Medium term (2-3mths):

- SCCG, CHSFT and GHFT will continue to work together to ensure that patients receive access to high quality services which meet NHS Constitutional standards. This will include the use of the most appropriate clinical skills and expertise to maintain patient safety and quality.
- SCCG, CHSFT and GHFT will continue to develop a “one stop” breast care assessment service for patients from Sunderland. This would ideally be based in Sunderland and options currently being considered are the development of an assessment unit within either Sunderland Royal outpatients department or Grindon Lane Primary Care Centre.
- SCCG will develop a service specification for a high quality breast care service which is informed by existing clinical standards as well as the views of patients. The specification will use evidence from the patient engagement exercise undertaken to support the development of future breast care service model.

Longer term (3-5mths):

- SCCG will complete commissioning arrangements for a high quality “one stop” breast care assessment unit for the population of Sunderland so that new services can start no later than 1st April 2016.
- SCCG will ensure that the new contracts for services will include high quality care for all breast care patients in Sunderland and that these services are consistent (where clinically safe and resources are available) with the findings of the patient engagement exercise

4. Patient Engagement Exercise

SCCG has carried out a comprehensive engagement exercise with former breast care patients to inform the planning of new services. The engagement process was designed to get patient views of what was good and bad in their experience and use

this information to develop a high quality service based upon what is most important to patients.

The following is an overview of the key messages from the engagement exercise;

- It is important to note that, virtually without exception, all respondents praised the services highly and were open and willing to support development of the new service with a view to helping patients in the future based on their own past experiences.
- Advice OVER information was key. Many people suggested they wanted more clinical support in the decision making around treatment(s) including surgery; then followed up with detailed, relevant and consistent support information.
- Patients want various phases of treatment in one place and within the same appointment where possible. This linked to issues some patients had regarding patient transport and accessibility to services.
- While appreciating that some specialist services may need to be carried out in a neighbouring hospitals or clinics, where possible diagnostics and any ongoing treatments (e.g. Chemo) should be carried out in Sunderland.
- The level of support from Clinical Nurse Specialist (at CHSFT) was cited as being excellent by the majority and there was anxiety that this service would be diluted or moved to another site.
- Some patients commented on issues around privacy and dignity but often acknowledging the pressures the NHS was under and that many problems could be addressed if more resource/staff were available.
- There was a noticeable amount of negative feedback on clinical care of inpatient services, including issues around lack of staffing; apparently inexperienced staff; poor communication and pain control. However, other services on pathway where on the whole, highly commended.
- Finally, support from 3rd sector organisations was recognised regularly and opportunities to maintain and enhance those relationship were supported.

The full report from the engagement exercise has been attached as an annex to this briefing paper.

5. Summary

SCCG is committed to ensuring that the population of Sunderland has access to a high quality breast care service. The service provided will be based on current clinical evidence and will include a “one stop” assessment unit. High quality safe and effective services will be provided within Sunderland where this can be achieved given the availability of clinical expertise and resources.

SCCG, CHST and GHFT are all working together to achieve the best services possible and which meet the expectations of local patients. All NHS organisations will maintain clear and timely communication with patients and professionals regarding the provision of these important services.

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Dr. Claire Bradford
Medical Director
NHS Sunderland CCG

A handwritten signature in black ink, appearing to read 'Scott Watson', on a light grey background.

Scott Watson
Head of Contracting & Performance
NHS Sunderland CCG