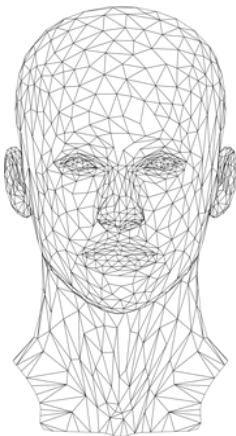


Head and Neck Workstream

Programme Briefing and Key Messages

Issue 2: December 2018

Welcome to the second edition of the Head and Neck Programme briefing which aims to keep stakeholders informed and up to date about the work of the Head and Neck Steering Group by regularly providing Key Messages and requesting your comments and views.



The plan

To achieve the [aims](#) of the Head and Neck services programme, all the necessary actions need to be identified and put into a project plan. This helps to ensure that the intended actions have an owner and can be carried out in a logical order and in an appropriate time scale. The initial overarching timeline for key stages of the project plan is shown in the diagram below, although this is subject to change as the work progresses and additional actions are identified:



The current stage....

It can be seen in the provisional timeline set out above, that the Head and Neck services programme is currently in the design phase. This initial work will help to obtain a clear understanding of the current set up and the arrangement of Head and Neck services in Lancashire and South Cumbria and to set out a clear vision of the desired future state. Members of the Head and Neck Steering Group and people who have used Head and Neck services and their families are providing information, data and experience to inform the programme.



A meeting was held on 18/12/18 with members of [The Swallows](#), an organisation that supports people affected by head and neck cancer, to find out more about what they thought worked well within head and neck services, what could be improved and what was important to them when receiving care and treatment.

The group gave positive feedback around the staff involved in their care and also suggested improvements around:

- having more choice in relation to treatment options
- more involvement of the patient's family and carers
- trying to make information more personalised so that it meets the patient's and family's information requirements.

Further information about the feedback provided, is shown on the next page.

There will be ongoing engagement throughout the work programme.

Some of the views of members of The Swallows group on Head and Neck Cancer services:


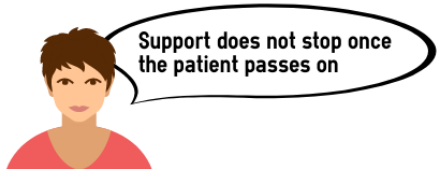


Head and Neck Cancer – Initial Engagement Feedback – December 2018

Purpose and Outcomes

The purpose of this session was to discuss treatment experiences with members of The Swallows and gain an insight into Head and Neck services across Lancashire.

Some of the feedback is summarised below.

Findings from this session will contribute towards both the Case for Change and Model of Care.

What works well?	What could be better?
<p>Comments included:</p> <ul style="list-style-type: none"> • Being given news on a Friday, which can then be reflected over the weekend in time for appointments early the following week. • Recordings being made of patients' clinical conversations. • Staff being excellent • The fact that the healthcare was free 	<p>For both diagnosis and treatment, the most common responses related to:</p> <ul style="list-style-type: none"> • Restricted choice/options in the service • Clearer information given to the patient regarding their treatment • The experience can be scary • Staff should be careful with the language they use with patients <p>Other Comments related to</p> <ul style="list-style-type: none"> - too many staff involved in treatment - lack of individualised care - issues relating to ward beds - treatment seeming rushed 
What is important to you?	Issues during treatment
<p>Comments included:</p> <p>Making sure that the relatives and carers of patients are being supported alongside the patients themselves.</p> <p>Every patient being treated as an individual.</p> 	<p>Comments included:</p> <ul style="list-style-type: none"> • As an improvement, swapping the order of chemotherapy and radiotherapy around (if clinically viable). • As an improvement, signposting relevant services outside of treatment (i.e. support groups, further reading) • Some treatments can affect patient ability to communicate, eat, socialise etc. • As an improvement, carers should be provided with just as much support and signposted as the patients. • Patients should be careful when researching their own conditions on the internet. 
Conclusions	
<p>Other considerations going forward:</p> <ul style="list-style-type: none"> • There is an obvious link to prevention and self-care within the pathway, with additional reference to: condition management, relationships (including carers) and finance. • It was noted that a doctor may describe 'success' in a different way to their patients. • IT issues can prevent cross site working 	

Key Messages from the December 2018 Head and Neck Steering Group meeting

- Strengths and weaknesses identified

As part of the exercise to build a picture of how head and neck services are currently delivered in Lancashire and South Cumbria, Trusts were asked to describe the strengths and weaknesses of head and neck services. It was recognised that any proposed changes to how these services are delivered would need to retain the many strengths that were identified, some examples of these are:



- Achievement of standards
- Collaborative working across Trusts
- Clinical Nurse Specialists
- Dedicated Trust Tracheostomy MDT which meets national guidelines
- Dedicated ward beds
- Diagnostic service works well
- Established links with Dental Laboratory including 3D printing
- Established robotic surgery service
- Excellent anaesthetic capacity and capability
- Excellent patient feedback across H&N service both via NCPES & NHS Choices
- Good ENT and OMFS working relationship and good links with therapy services e.g. Speech and Language Therapy and Dietetics
- Maxillofacial lab providing the full remit of services for H&N and OMFS patients
- Multi-disciplinary Head & Neck Pre-Treatment Clinic and ward rounds
- Non-melanoma skin cancer (NMSC) service
- One stop clinics

The identified weaknesses were around lone working, meeting some of the specified targets, on-call arrangements, the lack of specialised services at all sites, travel times for patients and their families and vacant posts within the services.

- Accurate and meaningful data relating to head and neck services

The [NHS Transformation Unit](#) (TU) specialises in strategic transformation in health and care with the aim of reducing variation in care and transforming patient outcomes. The TU are supporting the Head and Neck programme with the data requirements. The programme will be benefiting from a data subgroup that is made up of a Business Intelligence analyst and an Operations manager from each Trust. This arrangement will provide a good platform to sense check data, enable meaningful comparison and recognise any gaps.

Next meeting of the Head and Neck Steering Group

The next meeting of the Head and Neck Steering Group is due to take place on Friday 25th January 2018. The focus for this meeting will be on the options for delivering head and neck services and the criteria for evaluating the suitability of these suggested options. The third edition of this Key Messages document will be shared following this.

Questions and Queries

This briefing is for use within your own organisation and across your local system, for discussion and information. Please feel free to include it on meeting agendas and circulation lists as you see fit.

If you have any questions or queries, please contact healthier.lsc@nhs.net and we will endeavour to respond as soon as possible.