

Report on the Britain against Cancer Conference

Cancer Priorities for the new NHS

Tuesday 10th December 2013

The All Party Parliamentary Group on Cancer was founded in 1998 to keep cancer at the top of the parliamentary agenda, and to ensure that policy-making remains patient centred. The Group brings together MPs and Peers from across the political spectrum to debate key issues and to campaign together to improve cancer services. This year they held a conference in Central Hall, Westminster to launch the final report on cancer priorities for the new NHS entitled "Cancer across the domains". I was lucky enough to secure funding from NRCN to attend the meeting. There were around 500 delegates at the conference including MPs, NHS Managers, Doctors, Patients, members of Pharmaceutical Companies, Charity employees etc.

Introduction by John Baron MP, Chairman, APPG on Cancer:

John Baron opened the conference by explaining that the APPG's remit was to be cancer's voice in Parliament. The group had been successful in its campaign to promote earlier diagnosis by calling for the introduction of the one and five year survival rates in both the NHS Outcomes Framework and the Clinical Commissioning Group Outcomes Indicator Set.

He explained that the group had identified five domains within NHS England that needed to be prioritised to improve the experiences and outcomes of cancer patients. These domains are:

Domain 1 – Preventing people dying prematurely by saving an additional 5,000 people every year by 2014/15. The call was to support GPs to help them identify cancer signs and symptoms; tackling variations across the country; raising awareness of cancer signs and symptoms.

Domain 2 – Enhancing the quality of life for people with long-term conditions. They suggested adoption of the Recovery Package should be promoted and NHS England should work with CCGs to commission Stratified Care Pathways.

Domain 3 – Helping people to recover from episodes of ill health. They suggested rehabilitation programmes should be an integral part of care to improve patient outcomes post treatment and that more should be done to improve the management of the end of active treatment.

Domain 4 – Ensuring that people have a positive experience of care. The group thought that the Cancer Experience Survey should be conducted on a regular basis and that all cancer patients should be able to benefit from the invaluable support of Clinical Nurse Specialists.

Domain 5 – Treating and caring for people in a safe environment. The group called for comprehensive data to be maintained and collected to compare different patient outcomes, to learn from mistakes and disseminate best practice.

Address from the Shadow Secretary of State for Health – Rt Hon Andy Burnham MP:

Andy Burnham then spoke to the Conference suggesting that all the parties should rise above politics to ensure that the care given to cancer patients was improved. He concentrated on 4 key areas: Early diagnosis; access to services; living with cancer; and prevention.

Early diagnosis: He said that 50% of patients did not get a 2 week referral and that GPs needed more support to diagnose cancer early.

Access to services: He thought that there was a real inequality issue and that if you came from Liverpool you were twice as likely to die from cancer than patients treated elsewhere in the country. He suggested that access to newer drugs should be available to all.

Living with cancer: He thought that this area was under prioritised and that patients needed help with hospital car parking charges etc. He thought that there should be a single point of contact for a cancer patient to deal with the physical, mental and social aspects of a cancer diagnosis. He suggested that the home might be the default setting for care rather than the hospital.

Prevention: He suggested that physical activity was the core issue and should be the centre of any policy – he called this his “bottom up initiative”. He was very happy with the standardised packaging for cigarettes and thought there should be a new boldness to deal with alcohol minimum unit pricing. He also thought that there should be more regulation of food contents in such items as cereals which can contain up to 38% sugar. He called for 50% of the population to be active by 2025.

Breakout session 6 – What needs to happen now? End of life and the Liverpool Care Pathway Review:

This session was chaired by Imelda Redmond, the Director of Policy and Public Affairs at the Marie Curie Cancer Care. The panel was made up of Glyn Davies MP, Professor Rob George and Ian Leech a Community Engagement Officer and Service User.

Ian Leech spoke about the care received by his daughter when she died and suggested that nurses and clinicians needed better training and talking rather than sacking and suing. He talked about the 4 “Cs” – Care, compassion, communication and common sense.

Glyn Davies suggested that we needed a new system to replace the Liverpool Pathway and that there was now a real will across the parties to acknowledge that there should be specialist doctors and nurses to deliver end of life care.

Professor Rob George said that everyone was deeply shocked by the report and that staff were under resourced and not well trained. He said that there was no sustainable structure to establish and maintain standards and that if skills were not practiced then they were not maintained. He said that dying is as much a social event as a physical one.

Fringe session – Independent Cancer Patients’ Voice – Bank your tissue – Invest for future generations:

This was a lively discussion about the pros and cons of tissue donation for health research chaired by Baroness Warwick from the Human Tissue Authority with a presentation by Professor Charles Swanton who explained the need for tissue at different stages of cancer development in order to develop better treatments for future cancer patients.

An expert panel then answered questions. The panel was made up of Helen Bulbeck, Director of Brainstrust UK; Victoria Chico, Lecturer in Law at Sheffield University; Matthew Cooke from the Teenage and Young Adult Group.

Address from Rt Hon Jeremy Hunt MP – Secretary of State for Health:

Jeremy Hunt accepted that progress to date had been disappointing and that the Country was 27 out of 35 countries in the survivorship league tables.

He did point out that the 1 year survival rate had improved over 15 years from 59% to 68%. He said that the “Be clear on cancer” campaign had been very successful and he endorsed the Genomics England initiative. He even suggested that David Cameron thought this initiative had the potential to be as successful as the invention of the internet.

He said that out of 70,000 cancer patients – 10% were seen 5 times by their GP before they were referred which was not acceptable. He talked about reforming the GP contract and that all over 75 year olds will have a nominated GP responsible for delivering their care.

He said that there was too much variation across the country in delivering treatments and that the Government needed to work with the inspections teams to drive up standards. He suggested that we needed to be safe but not too cautious and ended by quoting Nelson Mandela who said that “bravery is the determination to overcome fear”.

Conclusion:

This was an interesting conference showing where the political parties have obtained consensus on where NHS England should focus its efforts on cancer treatment and care. The report from the All Party Parliamentary Group on Cancer will hopefully help NHS England to embed best practice across the organisation to ensure that cancer patients receive the care they so rightly deserve.

Lesley Turner

Member of the Palliative and Supportive Care CSG

Member of Independent Cancer Patients’ Voice.

12th December 2013.