

Report to:	HEALTH AND WELLBEING BOARD
Relevant Officer:	Rosalyn Bradshaw, Commissioning Manager, Blackpool Clinical Commissioning Group
Relevant Cabinet Member:	Councillor Graham Cain, Cabinet Secretary (Resilient Communities)
Date of Meeting	7 September 2016

FYLDE COAST CANCER STRATEGY (2016-2021)

1.0 Purpose of the report:

- 1.1 To present the Fylde Coast Cancer Strategy for 2016-2021. The Strategy has been developed in conjunction with the key stakeholders of the Fylde Coast Cancer Steering Group, which includes Blackpool Clinical Commissioning Group, Fylde and Wyre Clinical Commissioning Group, Blackpool Teaching Hospitals NHS Foundation Trust, Social Care and Public Health.

2.0 Recommendation(s):

- 2.1 To support and endorse the implementation of the Fylde Coast Cancer Strategy as attached at Appendix 7a.

3.0 Reasons for recommendation(s):

- 3.1 To have a Fylde Coast Cancer Strategy for 5 years (2016-2021) that has been ratified by all key stakeholder organisations by the target date of 1 August 2016.

3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

3.2b Is the recommendation in accordance with the Council's approved budget? Yes

3.3 Other alternative options to be considered:

To consider any additions or amendments to the Fylde Coast Cancer Strategy, or to provide limited support and endorsement to the strategy with proposed additions or amendments.

4.0 Council Priority:

4.1 The relevant Council Priority is: “Creating stronger communities and increasing resilience”

5.0 Background Information

5.1 The Fylde Coast Cancer Strategy 2016-2021 is a 5 year Strategy which has been led and developed by Fylde and Wyre Clinical Commissioning Group on behalf of the Fylde Coast Cancer Steering Group. The Strategy has been developed in conjunction with the key stakeholders of the Fylde Coast Cancer Steering Group, which includes Blackpool Clinical Commissioning Group, Fylde and Wyre Clinical Commissioning Group, Blackpool Teaching Hospitals NHS Foundation Trust and Public Health and Social Care colleagues from the Local Authority.

5.2 The Fylde Coast presents a varied and challenging demographic characterised by an ageing population and a higher than average burden of long term conditions with co-morbidities. There are areas of extreme deprivation within the Fylde Coast, including Blackpool, which has high levels of unemployment and transience while neighbouring Fylde and Wyre localities have a higher than average elderly population. Life expectancy in some areas is markedly below the national and North West average with cancer as the second largest cause in reduction of life expectancy.

5.3 The Terms of Reference and Structure of the Fylde Coast Cancer Steering Group focus on strategic development and transformational change, the development and implementation of the Strategy is considered to be essential to support the process.

5.4 The Strategy aims to outline the changes required to make a demonstrable improvement in Cancer services, patient outcomes and experiences for the Fylde Coast over the next 5 years. Fylde and Wyre Clinical Commissioning Group, Blackpool Clinical Commissioning Group and Blackpool Teaching Hospitals are jointly responsible for the achievement of the actions identified within the Strategy. The outcomes to be delivered from this framework are to:-

- Raising awareness of and improving earlier diagnosis to reduce the number of late presentations
- Promoting lifestyle changes to reduce cases of preventable cancers
- Improving survival rates, improve support services for those living with and beyond cancer
- Reducing Variations in care between diagnoses
- Prompt treatment following diagnosis
- Implementing comprehensive holistic care and support for increasing numbers of

patients in recovery

- Improving patient experience of cancer services
- Providing the best possible quality of life, including end of life

- 5.5 The Steering Group's objective is to work in collaboration with key partners to deliver integrated cancer services that are affordable, sustainable and effective. More specifically, working with partners to improve the 1 year and 5 year cancer survival rates, improve cancer waiting times (2 week, 31 days and 62 day waits), improve quality of life for the Fylde coast cancer patients, promote self-care and management of patients own care and identify and support the design and implementation of innovative cancer services.
- 5.6 To drive forward the Fylde Coast Cancer Strategy, 6 priority areas have been defined :-
1. Prevention (including awareness and early detection)
 2. Investigation
 3. Diagnosis
 4. Treatment
 5. Living With and Beyond Cancer
 6. Palliative and End of Life Care
- 5.7 A number of smaller work streams will underpin the delivery of the strategy, each with detailed action plans for delivery of elemental parts of the plan. Delivery against the aspirations of the plan will be monitored via the Cancer Steering Group for the Fylde Coast.
- 5.8 Drafts of the strategy have been presented to partner organisations. The strategy has been amended to reflect any feedback received, particularly to place a greater emphasis on prevention. The revisions to the strategy have been discussed and agreed by the Fylde Coast Cancer Steering Group.
- 5.9 Following final approval of the strategy an action plan to prioritise and implement components of the strategy will be developed by the Steering Group. Any elements of the strategy which represent a large scale change and/or have a significant impact on the Steering Group member organisations or partner organisations in terms of resource or otherwise will be highlighted to relevant organisations, as and when proposals are developed.
- 5.10 Does the information submitted include any exempt information? No

5.11 List of Appendices:

Appendix 7a: Fylde Coast Cancer Strategy

6.0 Legal considerations:

6.1 None

7.0 Human Resources considerations:

7.1 None

8.0 Equalities considerations:

8.1 An Equality Impact Assessment has been produced for the Fylde Coast Cancer Strategy and issues will continue to be assessed as the strategy is implemented and plans are created.

9.0 Financial considerations:

9.1 Any elements of the strategy which represent a large scale change and/or have a significant impact on the Steering Group member organisations or partner organisations in terms of resource or otherwise will be highlighted to relevant organisations as and when proposals are developed.

10.0 Risk management considerations:

10.1 Once the Fylde Coast Cancer Strategy has been approved, the Steering Group will develop a Cancer Strategy risk register that will identify, analyse, evaluate and control the risks that threaten the delivery of the Strategy. The risks will be reviewed, updated and monitored on an annual basis. Risks will be assessed in terms of proximity and how likely it is that they will occur.

10.2 The potential key risks which have been identified at the outset of the strategy are considered to be both physical (in terms of staffing resource to implement the plan) and financial (in terms of investment required to develop and implement new services).

11.0 Ethical considerations:

11.1 None

12.0 Internal/ External Consultation undertaken:

12.1 In addition to consulting with partner organisation, engagement activities have been undertaken across the Fylde Coast to engage with the members of the public:

- Patient and Public Involvement Forum (PPI) – Blackpool Clinical Commissioning Group
- Patient Participation Network Group (PPG) – Blackpool Clinical Commissioning Group
- People’s Panel - Fylde and Wyre Clinical Commissioning Group
- Patient Participation Groups (PPE) - Fylde and Wyre Clinical Commissioning Group
- Communication and Engagement Team – Drop in session at (Blackpool Teaching Hospitals Trust)

13.0 Background papers and further information:

13.1 The sources of information that informed the strategy are as follows

- Five Year Forward View (NHS England 2014)
- Cancer Survivorship Initiative Vision Document (DoH 2010)
- Achieving World-Class Cancer Outcomes, A Strategy for England 2015-2020 (Independent Cancer Taskforce)
- Living with and Beyond Cancer. Taking Action to Improve Outcomes (National Cancer Survivorship Initiative 2013)
- Suspected Cancer: Recognition and Referral (NICE guidelines June 2015)
- Joint Strategic Needs Assessment Blackpool