Intelligence

National Cancer Action Team
Part of the National Cancer Programme

NHS

National Cancer Peer Review Programme

Evidence Guide for: Designated TYA Hospital Measures

Foreword

This evidence guide has been formulated to assist Networks and their constituent teams in preparing for peer review. The contents of this guide are not exhaustive and organisations should continue to tailor their policies to reflect activity of the respective team, whilst demonstrating compliance with the key themes. Networks and their constituent teams during the review process will be required to demonstrate ownership of all policies, and assure visiting review teams that policy is reflective of practice.

Agreement

Where agreement to guidelines, policies etc. is required this should be stated clearly on the cover sheet of the key document including date and version. Similarly, evidence of guidelines, policies etc. requires written evidence unless otherwise specified. The agreement by a person representing a group or team (chair or lead, etc.) implies that their agreement is not personal, but that they are representing the consensus opinion of that group.

Confirmation of Compliance

Compliance against certain measures will be the subject of spot checks or further enquiries by peer reviewers when a peer review visit is undertaken.

When self assessing against these measures a statement of confirmation of compliance contained within the relevant key evidence document will be sufficient and further advice can be found in the NCPR Handbook.

Key Themes for a Designated TYA Hospital

Introduction

With reference to the guidance on Key Themes, when completing a report, please provide comments including details of strengths, areas for development and overall effectiveness of the designated TYA hospital. Any specific issues of concern or good practice should also be noted. It is important to demonstrate any measurable change in performance compared to previous assessments.

Designated TYA Hospital Key Themes:

1. Structure and function of the service

Comment in relation to leadership of the service and membership of the team responsible for the care of TYAs with malignant disease. In addition comment on progress towards implementing IOG recommendations and network configuration issues.

2. Coordination of care/ patient pathways

Comment on coordination and patient centred pathways of care, network guidelines and communication. This includes considering pathways of shared care between site specific MDTs, specialist palliative care MDTs and 'cross cutting' groups and the TYA MDT. It is important to demonstrate that appropriate treatment facilities are available. There may be information from related initiatives not covered by the measures.

3. Patient experience

Comment on the commitment of the service to gain feedback on patient experience. In addition, comment on the achievement of improvements to service delivery and overall patient experience. Consider information associated with patient support initiatives, communication with and information for patients. It is important to demonstrate any measurable change in performance regarding these parameters, compared to previous assessments.

4. Clinical outcomes/ indicators

Comment on the range of performance of the designated TYA hospital – where available, the data from the clinical indicators should be used. You should comment separately on each indicator. It is important to demonstrate any measurable change in performance regarding these parameters, compared to previous assessments. There should be special focus on outliers in the network and the relative performance of the service in relation to the national range. Include comments on clinical research and results of some network audit projects may also be relevant.

As the national clinical indicators for TYA with cancer are still being developed, please agree the top five clinical priority issues identified by the PTC, TYA Designated Hospitals and MDTs in the TYA network and adult cancer network and comment on the performance regarding these.

This section of the report requires specific answers to:

- What are the mortality rates within 30 days of treatment?
- What is your recruitment to trials?
- Outcomes of any key audit projects?

TYA Designated Hospital Operational Guide - Agreement Cover Sheet

This Operational Guide has been agreed by:

Position: Chair of the TYA Cancer Network (11-1D-101)

Name:

Organisation:

Date Agreed:

Position: Lead Clinician for TYAs for the Designated Hospital (11-1D-105, 106)

Name:

Organisation:

Date Agreed:

Position: Head of Service for Chemotherapy (11-1D-103, 104)

Name:

Organisation:

Date Agreed:

Position: Line Manager of the Lead Clinician for the TYA Designated Hospital (11-1D-101)

Name:

Organisation:

Date Agreed:

Position: Line Manager of the Lead Nurse for the TYA Designated Hospital (11-1D-102)

Name:

Organisation:

Date Agreed:

Position: Hospital Manager responsible for Inpatient Facilities (11-1D-103)

Name:

Organisation:

Date Agreed:

Position: Hospital Manager responsible for Day Care/Outpatient Treatment Facilities (11-1D-104)

Name:

Organisation:

Date Agreed:

Position: Line Manager of the Social Worker(s) (11-1D-105)

Name:

Organisation:

Date Agreed:

Position: Line Manager of the Youth Worker/Activity Coordinator(s) (11-1D-106)

Name:

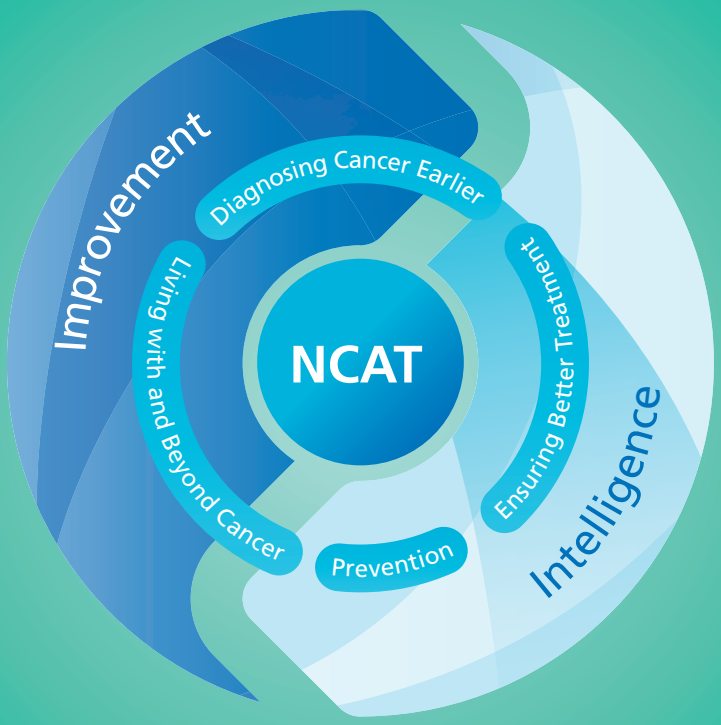
Organisation:

Date Agreed:

TYA Designated Hospital Measures Evidence Guide – Operational Guide

Category	Link to Measure	Guidance for Compliance* (Please refer to full details of the measure)	Additional Guidance
Introduction		Confirm the pattern of association of the individual designated TYA hospital within the TYACN and detail the catchment population of the Trust. State which malignancies are covered by the designated hospital and describe the pathways of care.	
Leadership Arrangements	11-1D-101	State name of the lead clinician for TYAs for the hospital and detail role description including time allowed for this.	The lead clinician should have a practice,and worked in the designated hospital in one or more of the following malignancies which includes patients in the TYA age range. • Leukaemias • Lymphomas • Germ cell malignancy • Bone and/or soft tissue sarcomas • Brain and CNS malignancy
	11-1D-102	State name of the lead nurse for the TYA designated hospital and detail responsibilities including time allowed for this. List the training qualifications held by the lead nurse.	The lead nurse should have completed cancer related training at least to the level specified for a core nurse member of a site-specific MDT.
Membership of the team	11-1D-105	State name(s) of the social worker(s) for the TYA designated hospital and detail responsibilities including membership of the TYA MDT.	
	11-1D-106	State name(s) of the youth worker/activity coordinator(s) for the TYA designated hospital and detail responsibilities including membership of the TYA MDT.	

Category	Link to Measure	Guidance for Compliance* (Please refer to full details of the measure)	Additional Guidance
Facilities	11-1D-103	Detail policy for place of in-patient chemotherapy delivery, naming the wards.	
	11-1D-104	Detail policy for place of out-patient or day case chemotherapy delivery and specify rooms to be used.	
Agreements		Confirm date when operational guide was agreed by the relevant personnel.	Agreements.



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