Intelligence

National Cancer Action Team
Part of the National Cancer Programme

NHS

National Cancer Peer Review Programme

Evidence Guide for: PTC Core Measures

Foreword

This evidence guide has been formulated to assist networks and their constituent cancer service teams in preparing supporting evidence 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 quality measures. 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 three key documents 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.

Key themes for a Principal Treatment Centre (PTC)

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 PTC. 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.

PTC Key Themes:

1. Structure and function of the service

Comment in relation to leadership, membership, attendance and meeting arrangements, MDT and workload. In addition, any measures within the operational policies section regarding patients which are reviewed by the PTC, percentage of time PTC core members devote to this cancer type, training requirements of PTC members and responsibilities of nurse PTC members also help demonstrate this. MDT workload data and surgical activity is also important here.

Teams should specifically comment with regard to the following questions:

- Are all the key core members in place?
- Does the PTC have a clinical nurse specialist?
- What is the compliance with waiting time standards?
- How many patients by equality characteristic (race, age and gender) were diagnosed / treated in the previous year?

2. Coordination of care/ patient pathways

Comment on coordination and patient centred pathways of care, network guidelines and communication. For example, any measures relating to agreement of network guidelines and patient pathways, recording of treatment planning decisions, key worker and principal clinician policies and communication with GPs.

3. Patient experience

Comment on information on and achievement of improvements to service delivery, patient experience and gaining feedback on patients' experience, communication with and information for patients and other patient support initiatives.

It may include information associated with enhanced recovery programmes, communication with and information for patients and other patient support initiatives and service improvement initiatives such as process mapping and capacity and demand analysis.

This section of the report requires specific answers to:

- What are the local patient experience exercise feedback results

4. Clinical outcomes/ indicators

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 the relative performance of the PTC in relation to the national range.

As the national clinical indicators for children's cancer are still being developed, please comment on the top five clinical priority issues identified by the PTC, POSCUs and MDTs in the 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?

Comment on any relevant measures including any relating to data collection, relevant network audits and research activity.

PTC Core Measures Operational Policy - Agreement Cover Sheet

The Operational Policy has been agreed by:

Position: Host Trust Lead Cancer Clinician

Name:

Organisation:

Date Agreed:

Position: PTC Lead Clinician

Name:

Organisation:

Date Agreed:

Position: Head of Service for Chemotherapy for the PTC (11-7B-101, 102, 105, 109, 130, 136, 137, 138, 144, 145, 146, 147, 148, 149, 150, 151)

Name:

Organisation:

Date Agreed:

Position: Hospital Manager responsible for Inpatient Treatment Facilities (11-7B-101, 105, 111, 112, 114)

Name:

Organisation:

Date Agreed:

Position: Chair of the Host Trust's Drug & Therapeutics Committee Group (11-7B-130)

Name:

Organisation:

Date Agreed:

Position: Chair of the Children's Cancer Network Coordinating Group (11-7B-132, 134, 149)

Name:

Organisation:

Date Agreed:

Position: Hospital Managers from hospitals hosting the children's chemotherapy services in the Children's Cancer Network (11-7B-133)

Name:

Organisation:

Date Agreed:

Position: Hospital Manager responsible for Pharmacy Services (11-7B-145)

Name:

Organisation:

Date Agreed:

Position: Lead Pharmacist of the Oncology Service (11-7B-145, 153, 154, 155, 156, 157, 158, 159)

Name:

Organisation:

Date Agreed:

Position: Line Manager for the Lead Pharmacist of the Oncology Service (11-7B-152)

Name:

Organisation:

Date Agreed:

Position: Line Manager for the Designated Pharmacist(s) (11-7B-154, 155, 156

Name:

Organisation:

Date Agreed:

Position: Head of the Hospital Pharmacy Department (11-7B-157)

Name:

Organisation:

Date Agreed:

Position: Head of Service for the Department of Radiotherapy (11-7B-162, 163, 164, 165, 167)

Name:

Organisation:

Date Agreed:

Position: Clinical Director for the Paediatric Anaesthetist(s) (11-7B-163)

Name:

Organisation:

Date Agreed:

Position: Hospital Manager responsible for the Department of Radiotherapy (11-7B-164, 165, 167)

Name:

Organisation:

Date Agreed:

Position: Hospital Manager responsible for the Department of Surgery (11-7B-170, 171)

Name:

Organisation:

Date Agreed:

PTC Core Measures Evidence Guide - Operational Policy

Category	Link to Measure	Guidance for Compliance* (Please refer to full details of the measure)	Additional Guidance
Introduction		Confirm PTC catchment population and detail pattern of association of individual cancer networks. List services of the PTC.	
	11-7B-127	Describe contents of cancer services directory (attach link).	The following should be included in the cancer services directory of the PTC's locality: • the core members of the PTC diagnosis and treatment MDT and the contact point for the team; • the core members of the PTC late effects MDT and the contact point for the team; • the location and core members of the PTC MDTs in the CCN and the contact points for these MDTs; • the location and core members of the TYA MDT and the contact point of the team; • the location and contact points for the PTC chemotherapy service; • the contact points for the 24-hour telephone advice service; • the location and contact points for the PTC paediatric radiotherapy service; • the contact point for the paediatric oncology palliative care service and 24-hour palliative care advice; • the patients' and carers' support groups which the CCNCG endorses (see measure 11-7A-125) with local contact points.

Category	Link to Measure	Guidance for Compliance* (Please refer to full details of the measure)	Additional Guidance
Facilities	11-7B-101	Detail policy for place of I/P chemotherapy delivery and state named wards.	
	11-7B-102	Detail policy for place of O/P chemotherapy delivery and specify rooms to be used.	
	11-7B-103	Detail specified regimens, protocols and emergency equipment that should be available in the I/P & O/P chemotherapy delivery areas.	
	11-7B-104	Description of the area for temporary storage of chemotherapy agents for the areas/wards/rooms used for the delivery of I/P & O/P chemotherapy.	Include detail of lockable fridge and cupboard.
	11-7B-105	State agreed number of single rooms to be used for I/P isolation.	Include details of en-suite facilities.
	11-7B-106 11-7B-110	Description of the paediatric oncology clinic.	The clinic should: • be identified in the hospital's outpatient department clinic list or timetable as a clinic for patients under the care of the PTC; • be exclusive to patients under the care of the PTC as opposed to including other paediatric outpatients; • be identified, together with a contact point for referral, in the primary care referral guidelines; • have the lead clinician of the PTC as a member of its medical staffing.
	11-7B-107 11-7B-108	Description of day care facilities.	Include details of waiting room and availability of paediatric resuscitation equipment.
	11-7B-109	Detail the policy for the day care recovery rooms and specify rooms.	
	11-7B-111 11-7B-114	Detail the policy for the oncology ward and specify ward. State the planning number of operational oncology beds.	This should be derived from the estimated average bed usage.

Category	Link to Measure	Guidance for Compliance* (Please refer to full details of the measure)	Additional Guidance
Workforce	11-7B-112	State the nursing establishment for the oncology ward and number of operational oncology beds.	This should be based on the nurse numbers for the operational oncology beds, as recommended by the Royal College of Nurses (RCN) document 'Defining Staffing Levels for Children's and Young Adult's Services' 2003, sections 7 and 5. All such nurses should be Registered Sick Children's Nurses (RSCN or RN [child]).
	11-7B-122	Consultant rota.	The on-call rota should: • be staffed wholly by named consultants, each of whom is a paediatric oncologist employed at the PTC and providing inpatient care as a part of their timetable during normal working hours; • provide 24/7 cover; • the on-call individual should be available for giving advice to enquiring clinicians regarding paediatric oncology patients being managed anywhere in the CCN, whether in hospital or in the community; • the on-call individual should be available to attend hospital facilities of the PTC when required; • there should be a minimum of five individual consultants.
	11-7B-123 11-7B-124	State cover arrangements.	Resident cover rota should include medical staff in paediatrics of ST3 minimum level of seniority.

Category	Link to Measure	Guidance for Compliance* (Please refer to full details of the measure)	Additional Guidance
Workforce	11-7B-125	State WTE and professional roles for each staffing group.	
	11-7B-126	State name of the protocol coordinator and detail list of agreed responsibilities including specified time.	
	11-7B-128	Describe the 24-hour telephone advice service.	The service should fulfil the following: • it should be available 24-hours a day, seven days a week, every day of the year; • administrating the staff rota should be the responsibility of the PTC, but staff on it may be from the PTC or a PTC; • there should be one or more contact points for the service overall, but for any given part of the catchment area there should be only a single contact point; • staffing may be by nurses or medical staff or a combination; • the minimum permissible level of training or qualifications of a staff member on the rota should be agreed by the CCNCG; • there should be a 24-hours a day, seven days a week rota whereby a consultant paediatrician oncologist is permanently available to give telephone advice when required to the staff members of the patients and carers advice service; • the contact point for information should be distributed to all new patients and their carers.
Training	11-7B-116 11-7B-117 11-7B-118 11-7B-119 11-7B-120 11-7B-121	Specify minimum requirements for the types of training and number of trained nurses for each location and setting.	Refer to Figure 1 within the introduction to the measures.

Category	Link to Measure	Guidance for Compliance* (Please refer to full details of the measure)	Additional Guidance
Chemotherapy	11-7B-129	State name of the head of service and detail agreed responsibilities.	
	11-7B-130 11-7B-131	List the membership of the chemotherapy group and state terms of reference.	Identify member who is a representative from the trust's drugs and therapeutic committee.
	11-7B-132	State PTC list of acceptable regimens (attach link with full details).	The list should be compatible with the list for the CCN. Identify the permissible practice of nurses who have undergone only the CCN's low risk training programme in chemotherapy administration.
	11-7B-133	Detail the policy on unsafe chemotherapy workload.	
	11-7B-134	Detail the policy for preventing regular use of regimens not on the agreed list.	
	11-7B-136	Detail guidelines/protocols on pre-chemotherapy investigations (attach or link to the full guidelines).	
	11-7B-137	Detail guidelines/protocols for general chemotherapy (attach or link to the full guidelines).	The guidelines should be common across the CCN.
	11-7B-138	Detail guidelines/protocols for regimen specific chemotherapy (attach or link to the full guidelines).	
	11-7B-139	Details of the type of information offered to patients.	The information should be common across the CCN.
	11-7B-140	Describe the content of the consent form.	In the case of the regimen specific information, the regimen should be specified on the consent form.
	11-7B-141	Describe the content of the pre-course record.	
	11-7B-142	Describe the content of the pre-cycle record.	
	11-7B-143	Describe the content of the post-course record.	
	11-7B-144	Detail the verification procedure.	
	11-7B-145	Detail the policy for out of hours chemotherapy.	

Category	Link to Measure	Guidance for Compliance* (Please refer to full details of the measure)	Additional Guidance
Chemotherapy Training	11-7B-146	State name of the chemotherapy nurse trainer and detail agreed responsibilities including time allowed for this.	
	11-7B-148	Detail the administration/authorisation policy.	
	11-7B-149	State agreement to provide the CCN's training programme.	Including the agreed part of the programme for medical staff and the low risk training programme.
	11-7B-147	Describe the process for maintaining the list of staff authorised to administer chemotherapy (nursing).	
	11-7B-150	Describe the process for maintaining the list of staff authorised to administer chemotherapy (medical).	
	11-7B-151	Detail the prescribing policy.	Include description of distribution process.
Pharmacy Services	11-7B-152	State name of the lead pharmacist and detail agreed responsibilities.	
	11-7B-153 11-7B-154 11-7B-155	State name(s) of the designated pharmacist(s) and detail agreed responsibilities.	Include the responsibility for the preparation facilities in the list of responsibilities of a single designated pharmacist.
	11-7B-156		Include the pharmaceutical responsibility for chemotherapy related research in the list of responsibilities of a single designated pharmacist.
	11-7B-157	Detail the pharmacy department organisational chart.	
	11-7B-160	Describe the prescribing safeguards.	
	11-7B-161		

Category	Link to Measure	Guidance for Compliance* (Please refer to full details of the measure)	Additional Guidance
Radiotherapy	11-7B-162	State name of the lead therapeutic radiographer and detail agreed responsibilities including time allowed for this.	
	11-7B-163	State name(s) of the specified anaesthetist(s) for children's radiotherapy and detail time allowed for this.	
	11-7B-164	State name(s) of the specified ODP(s) for children's radiotherapy and detail time allowed for this.	
	11-7B-165	State name(s) of the specified recovery nurse(s) for children's radiotherapy and detail time allowed for this.	
	11-7B-167	State name(s) of the specified play specialist(s) for children's radiotherapy and detail time allowed for this.	
	11-7B-166	State the location of the recovery room.	The room should be reserved exclusively for this use when children are receiving radiotherapy under sedation or anaesthetic in the department and should contain paediatric resuscitation equipment.
Surgery	11-7B-168	State names of the designated specialist paediatric surgeons for children's cancer, detail membership of MDTs and CCLG and their work plans.	
	11-7B-169	State names of the specified paediatric anaesthetists for children's cancer surgery and detail work plans.	
	11-7B-170	State specified sessions of the paediatric ODPs for children's cancer surgery.	
	11-7B-171	Detail policy for theatre usage for children's cancer interventional radiology or surgical procedures. Include timetable showing specified list(s).	
Agreements		Confirm date when operational policy was agreed by the relevant personnel.	

PTC Core Measures Work Programme - Agreement Cover Sheet

This Work Programme has been agreed by:

Position: PTC Lead Clinician

Name:

Organisation:

Date Agreed:

Position: Lead Pharmacist of the Oncology Service (11-7B-159)

Name:

Organisation:

Date Agreed:

PTC Core Measures - Work Programme

Category	Link to Measure	Guidance for Compliance* (Please refer to full details of the measure)	Additional Guidance
Each area of the work-programme should include dates for implementation and a named lead.			
Service Improvement & Development			Outline the PTC's agreed service improvement action plan. Include details of how the team is planning to address any weaknesses in service delivery and/or the constitution & function of the PTC. It is important that the service improvement aspects of this work programme are aligned with the relevant national and local service improvement priorities.
Facilities	11-7B-113 11-7B-115	If required, outline plans to address the difference in the number of operational oncology beds and number of paediatric oncology admissions.	
Workforce	11-7B-125	If required, outline plans to address shortages in staffing designated for paediatric oncology.	
Training	11-7B-116 11-7B-117 11-7B-118 11-7B-119 11-7B-120 11-7B-121	If required, outline plans to address shortages of appropriately trained nurses.	
Pharmacy Services	11-7B-159	Outline details of remedial actions to address matters arising from the external audit.	
Actions from Previous Peer Review Assessments			Include any agreed actions arising from previous peer review, external verification or validation of self-assessment. Note: This will not be applicable in the first year following publication of the measures.
Agreements		Confirm date when work programme was agreed by PTC.	

PTC Core Measures Annual Report - Agreement Cover Sheet

This Annual Report has been agreed by:

Position: PTC Lead Clinician

Name:

Organisation:

Date Agreed:

Position: Lead Pharmacist of the Oncology Service (11-7B-159)

Name:

Organisation:

Date Agreed:

Position: Head of the Hospital Pharmacy Department (11-7B-162)

Name:

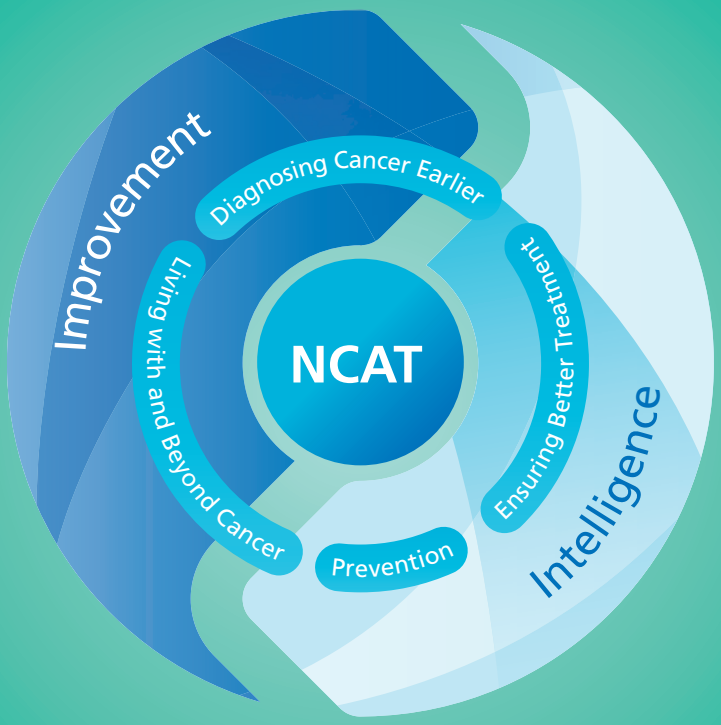
Organisation:

Date Agreed:

PTC Core Measures - Annual Report

Category	Link to Measure	Guidance for Compliance* (Please refer to full details of the measure)	Additional Guidance
Introduction			Define period report relates to (i.e. state year covered). Include short narrative giving a summary assessment of the PTC's achievements and challenges faced over the previous year.
Facilities	11-7B-113 11-7B-115	Include details of the assessment of bed occupancy for the oncology ward. Include details of the audit of oncology bed usage over 12 month period.	
Workforce	11-7B-125	State WTE and professional roles for each staffing group. Include average number of new cases of children's cancer over 2 years.	
Training	11-7B-116 11-7B-117 11-7B-118 11-7B-119 11-7B-120 11-7B-121	Include head count of nurses allocated to the operational oncology beds who are trained to at least the 'full internal' training level. Include head count of nurses allocated to the operational oncology beds who are trained to at least the 'internal foundation' training level. State the level of training achieved by all the nurses of band 6 or above working on the oncology ward. Include head count of nurses on duty during each shift of each working day that the day care facility is open for chemotherapy who are trained to at least the 'full internal' training level. Include head count of nurses on duty when the facility is open but not for chemotherapy who are trained to at least the 'full foundation' training level. Include head count of nurses allocated to the day care facility who are trained to at least the 'foundation internal' training level. State the level of training achieved by all the nurses of band 6 or above allocated to the day care facility.	

Category	Link to Measure	Guidance for Compliance* (Please refer to full details of the measure)	Additional Guidance
Chemotherapy	11-7B-135	Include records of the use of unlisted regimens.	
	11-7B-146	Confirm date of completion of study for chemotherapy nurse trainer.	
	11-7B-147	Include or attach link to list of staff authorised to administer chemotherapy (nursing).	
	11-7B-150	Include or attach link to list of staff authorised to administer chemotherapy (medical).	
Pharmacy Services	11-7B-158	Include the results of the external pharmacy audit.	
	11-7B-159	Detail remedial actions agreed to address matters arising from the external audit and describe how any investment proposals have been presented to the head(s) of pharmacy and the locality groups.	
Agreements		Confirm date when annual report was agreed by PTC.	



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