

Eastern Sector Cancer Hub Long-List Options Appraisal: To Identify Potential Sites For Service Provision - Undertaken on Tuesday 3rd July 2018 by the Eastern Sector Cancer (Non-Surgical) Transformation Project Group

Eastern Sector Cancer Hub Service Specification / Design Principles		Weighting (%)	Project Options							
			Do nothing; continue with current service model / provision	ESCH within a local, non-clinical setting	ESCH(s) at local Urgent Care(s) Centre(s) / Walk-In-Centre(s)	ESCH at STHK	ESCH at WHH	ESCH(s) at both WHH & STHK	ESCH at the new Liverpool CCC Site (2020)	
Clinical Facility	1	Is the ESCH required to be in a clinical facility? <i>(If Yes, all options / sites not within a clinical facility are ineligible to continue in this process)</i>	0%	Eligible	Ineligible; not a Clinical Facility	Eligible	Eligible	Eligible	Eligible	Eligible
Infrastructure & Estates	2	<p>Facilities to deliver a Sector Hub Outpatients Service:</p> <ul style="list-style-type: none"> • Sufficient facilities to deliver multi-professional clinics seeing almost all new patients for common cancers and some intermediate cancers in the sector: The estimated requirement is 12 rooms per day Monday to Friday, co-located ideally, but may be split across hot / cold sites within same Trust. • Waiting area for up to 60 patients per clinic. • Hub-based CCC Teams: 25-30 person multi-professional team base (e.g. Large flexible open plan office / offices). • Accommodation Standards: HBN Compliant and commitment to achieve Macmillan Quality Environment Mark (MQEM), a quality standard for cancer care environments. • Full MDT video-conferencing facility and shared interface with PACS and Histopathology, accessible via desktop. • Prompt access to imaging, pathology and pharmacy services. <p>Safe Use of Systemic Anti-Cancer Therapy (SACT) Facilities:</p> <ul style="list-style-type: none"> • Facilities and environment to develop sector hub chemotherapy facility provide 7 days of intermediate and complex SACT: <ul style="list-style-type: none"> o 20 chairs in sector hub. o Co-located with OPD clinics. o Access to prep, aseptics etc. o HBN and commitment to achieve MQEM. <p>Acute Oncology (AO) Sector Hub / Ambulatory Assessment</p> <ul style="list-style-type: none"> • The concept of a physical space on a hot-site to develop sector-based Acute Oncology Ambulatory Assessment on 6-7 days a week basis. • 4 trolley / bed assessment spaces. • Maximum geographical proximity to sector SACT hub (access to the best concentration of specialist medical and nursing workforce). • Central coordinating function for vague symptoms and malignancy of unknown origin (MUO) pathways in the sector, as anticipated patient numbers suggest this model is best viewed as a Hub model with strong links to promote access to local services where possible. 	40%	X		X	✓	✓	✓	X
	3	<p>Future Potential for Satellite Radiotherapy development:</p> <ul style="list-style-type: none"> • Available footprint to develop a future satellite radiotherapy facility: <ul style="list-style-type: none"> o Minimum 800 m2 of ground floor space within a site development control plan. o To support 2 linacs plus support accommodation for floor clinics. o Excludes radiotherapy planning/simulation capabilities at this stage. • Co-located / close adjacency with Oncology out-patient clinics and sector chemotherapy hub. 	15%	X		X	✓	✓	✓	✓
	4	<p>Research and Innovation (R&I) Infrastructure:</p> <ul style="list-style-type: none"> • Access to facilities and its infrastructure to support delivering significantly increased R&I activity in the sector, including: <ul style="list-style-type: none"> o Sample collection, processing, storage and transport. o Commitment from local laboratories to support R&I activity. o Access to biobank. 	10%	X		X	✓	✓	✓	✓
	Patient Access	5	<p>Patient Access:</p> <ul style="list-style-type: none"> • Convenient access within 45 minutes car journey for >90% of patients who would access care in the sector hub. • Free car parking available adjacent to the sector hub for all patients on active SACT and radiotherapy treatment. • Commitment to develop enhanced patient transport services e.g. shuttle services to ensure good access to sector hub for those who do not have access to a car. 	10%	✓		X	✓	✓	✓

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Support Services	6	<p>Support Services:</p> <ul style="list-style-type: none"> • Commitment to delivering extensive provision of 'wrap around' services based on developing existing services and resources. These to be available in sector hub, co-located with multi-professional clinics, including: <ul style="list-style-type: none"> o Clinical Nurse Specialists and key workers. o Benefits advice. o Cancer information. o Therapies. o Dietetics. o Wigs and prostheses. o Counselling and psychological medicine. o Palliative Care Services (Nurse & Consultant-led via the local specialist Palliative Care Team). 	20%	X		X	✓	✓	✓	✓
Broader Strategic Fit	7	<p>Strategic Fit & Partner Intentions:</p> <ul style="list-style-type: none"> • Sector hub located alongside sustainable MDTs for common cancers. • Alignment with any emergent future model of elective and emergency acute care in the sector. • Commitment from Emergency Department team to develop effective ambulatory AO pathways. • Commitment to delivering training placements in sector hubs for Deanery trainees. • Connectivity and inter-operability with IT CCC systems including Meditech. 	5%	X		X	✓	✓	✓	✓
Long List Options Appraisal Outcome				Fail	Fail	Fail	Pass 1st Stage; to be short-listed	Pass 1st Stage; to be short-listed	Pass 1st Stage; to be short-listed	Fail
Estimated Cost (£m)										

Please Note:

- 1) The long-list of options reviewed by the Project Group determined whether sites have the potential to provide an Eastern Sector Cancer Hub.
- 2) The outcome of the Long-List Options Appraisal is documented as a Pass 1st Stage or Fail to determine the short-listed options.
- 3) A detailed analysis of the short-listed options will be undertaken by the Project Group to identify the feasibility and availability of the service specification criteria at each site short-listed.

Eastern Sector Cancer (Non-Surgical) Transformation Project Group individuals who participated in the Long-List Options Appraisal on Tuesday 3rd July 2018 included:

Dianne Johnson	Chief Executive, Knowsley CCG (Chair, SRO for Eastern Sector Cancer Hub)
Mark Lammas	Commissioning Programme Manager, Knowsley CCG
Dr Ernie Marshall	Deputy Medical Director, Clatterbridge Cancer Centre NHS Foundation Trust
Jennie Crook-Vass	Programme Manager, Clatterbridge Cancer Centre NHS Foundation Trust
Alexa Traynor	Communications Assistant Director, Clatterbridge Cancer Centre NHS Foundation Trust
Dr Susan Burke	Macmillan GP & Primary Care Lead for Cancer & End of Life Services, Warrington CCG
Paul Mavers	Healtwatch Knowsley Manager

Representing Andrew Bibby, Assistant Regional Director of Specialised Commissioning (North), NHS England	
Suzanne Fenneh	Service Specialist, Specialised Commissioning (North) NHS England
Representing Ian Stoddard, Chief Finance Officer, St Helens CCG	
Adam Vinyard	Senior Finance Manager, St Helens CCG
Jackie Connell	Commissioning & Transformation Manager, St Helens CCG