

**PLANNING & COMMISSIONING COMMITTEE  
MEETING HELD ON 3 DECEMBER 2021  
CHAIR'S UPDATE REPORT**

**INTRODUCTION**

This is the Chair's report to the Clinical Commissioning Group Board following the December Committee.

**CANCER ALLIANCE**

The Deputy Director of Commissioning presented a report providing a brief update of the work that the Cancer Alliance was involved in progressing.

There had been some communication challenges between the Cancer Alliance and CCGs which were in the process of being addressed as, at present, the Alliance only sends out quarterly updates.

Concern had been expressed across the ICS around the direction of travel of the Cancer Alliance and if the focus was correct. For example 3000 Cancer champions had been trained via the Alliance which was positive but there was little apparent impact on patient pathways through pathway redesign.

A Cancer Summit had been held to understand what should be implemented immediately as well as looking forward. No feedback had been received from this yet.

It was stated that there were significant challenges around diagnostics and obtaining diagnostic testing in a timely manner.

Clinical Oncology as a service was under pressure both nationally and locally, but locally there was a significant challenge around breast oncologists. HUTHT teamed with NLAG, both hospitals were understaffed so there was a significant reduction in breast oncology.

There were aspirations for HUTHT and NLAG to continue to develop joint working and to progress towards being a single cancer service spanning both hospitals. Across the ICS cancer services were under pressure to deliver the services, the availability of workforce and diagnostics being cited as common causes of delays.

The existing Managing Director of the Cancer Alliance had moved into an alternative role therefore another Managing Director was being sourced.

The local Radiotherapy Operational Delivery Network (ODN) was the Yorkshire & Humber ODN which encompasses Leeds, Hull, Sheff. This ODN was relatively unique as it had 3 large providers of radiotherapy. The ODN Board was well established. Initial work was focussing on

- the adoption/compliance of radiotherapy providers with the national service specification
- the development of the ODN to be compliant with the national ODN specification
- SABRE – nationally looking at use for lung cancer, all 3 local Providers already do this

Cancer cases were being cancelled due to the availability of critical care. Hull University Teaching Hospital NHS Trist (HUTHT) were on CRITCON 3 which was the highest level of challenge within the critical care service.

Clarification was sought on what the next steps were for the Cancer Alliance as this was a core programme within the ICS which at present was not working.

The Deputy Director of Commissioning advised that fundamental change was required, and it was expected that the new Managing Director would have a new more structured focus.

The Lay Member stated a single approach under the ICS was required, moving from territorial working towards system working, along with alternative ways of working.

Concern was expressed around the less positive work of the Cancer Alliance and how services would be delivered, this would be escalated to the ICS.

### **REVIEW OF PULMONARY REHABILITATION SERVICE**

The Deputy Director of Commissioning presented a follow up review of the Pulmonary Rehabilitation Service following a previous review in June 2020 and the delivery of the COVID 'Recovery & Restoration phase'

The review had been undertaken in response to a request from the Quality and Performance Committee for assurance that the service had addressed the backlog in referrals and had the capacity to maintain service provision and meet future predicted demand.

The Quality and Performance Committee had requested assurance that a sufficient Pulmonary rehabilitation service was being commissioned based on historical data.

A review was undertaken in October 2021 to ascertain the present position of the service and to seek assurance that the recovery and restoration had been successful, and the Team could meet future capacity and demand moving forward.

It was noted that the service was back up to a full complement of staff and an additional nurse had been employed for expansion.

A generic review of pulmonary rehab across all areas would be undertaken on respiratory work across the ICS and respiratory network to ensure best practice was taking place.

Dr Ali request clarification on why the number of feedback responses was lower in September 2021 rather than August 2021.

Dr Balouch queried how many referrals were from GP's and how many were from lung health checks, The Deputy Director of Commissioning confirmed that this information would be gained.



**Vincent Rawcliffe**  
**Clinical Chair, Planning and Commissioning Committee**  
**December 2021**