

Trust Board Report

Meeting Date:

25 February 2013

Title:

Overview and update of the actions being taken to improve the cancer patient experience (following the results of the 2011-2012 National Cancer Patient Experience Survey (NCPES)).

Executive Summary:

- In 2010, the National Cancer Action Team on behalf of the DoH implemented a rolling programme of annual National Cancer Patient Experience Surveys (NCPES). The programme is intended to identify areas for improvement in the experience of patients throughout their cancer journey, and each Trust is mandated to participate. The results of the surveys are publicly available.
- 715 cancer patients from RWHT were surveyed (67% response rate). These patients received care at the Trust during early 2011, and were discharged from their initial first line treatment (ie surgery, chemotherapy, radiotherapy) between September and November 2011.
- The survey reflects the experience of the patient throughout the whole of their cancer journey (from initial presentation to their GP, to surgery and to follow up care in the community).
- The results for RWT are disappointing. For thirteen of the 70 questions the Trust was in the lowest 20% of hospitals, and was only in the top 20% for three questions.
- A programme to improve the cancer patient experience at the Trust was implemented in 2011, and this continues. The effect of this improvement programme would not have been realised in the 2011-2012 survey results, but are expected to become evident via improved results in the 2012-2013 patient survey.
- The NCPES will be repeated on an annual basis for the foreseeable future. Patients who received their care during early 2012, and who were discharged from their initial care between September & November 2012 will be surveyed in Jan – May 2013, and the results will be published in August 2013.

Action Requested:	No action required. This report is for information and reassurance purposes only.
Report of:	Gwen Nuttall, Chief Operating Officer
Author: Contact Details:	Cancer Leads Team Tel: 07747714903 Email:saran.evans@nhs.net
Resource Implications:	N/A
Public or Private: (with reasons if private)	Public
References: (eg from/to other committees)	<ul style="list-style-type: none"> • The 2011-2012 NCPES results were presented to TMT September 2012. • The NCPES results & action plans were reviewed by the Quality & Safety Committee November 2012 • The NCPES results and action plans have been shared with the local Cancer Patient Group (PACT) November 2012 • The Trust's progress against the NCPES action plan is monitored by the Cancer Leads Team on a monthly basis, and any issues would be raised to the Q&S committee • Formal assessment of the progress of each Clinical Team in improving the patient experience will be undertaken at the internal cancer peer review assessment of each MDT in July 2013.
Appendices/ References/ Background Reading	<p>Please find the following attached to this report:</p> <ul style="list-style-type: none"> • NCPES 2011-2012 survey results • Trust high level action plan to improve the cancer patient experience
NHS Constitution: (How it impacts on any decision-making)	<p>In determining this matter, the Board should have regard to the Core principles contained in the Constitution of:</p> <ul style="list-style-type: none"> ✚ Equality of treatment and access to services ✚ High standards of excellence and professionalism ✚ Service user preferences ✚ Cross community working ✚ Best Value ✚ Accountability through local influence and scrutiny <p>The results of the National Cancer Patient Experience survey are publicly available.</p>
Details	

Background

The National Cancer Patient Experience Survey is a DOH National Cancer Action Team initiative designed to identify failings within Trusts, to provide a mechanism for benchmarking, and to drive forwards improvements in the cancer patient experience. The Survey was first rolled out in 2010 and was repeated in 2011-12.

715 patients (67% response rate) over 16 years of age who received cancer treatment at the Trust during early 2011, and who were discharged from their initial “first line” care (surgery, chemotherapy, radiotherapy) between September and November 2011 were surveyed between Jan – May 2012. The survey results were published in mid August 2012.

The survey reflects the experience of the patient throughout the whole of their cancer journey (from initial presentation to their GP, to surgery and to follow up care in the community).

The survey will be repeated on an annual basis for the foreseeable future. Patients who received their initial care at the Trust during early 2012 and who were discharged from their initial care in September to November 2012 will be surveyed in Jan – May 2013, and the results will be published in August 2013.

2011-2012 Survey Results

The results for RWHT are attached (please see attachment).

The results for RWT are disappointing. For thirteen of the 70 questions the Trust was in the lowest 20% of hospitals, and was only in the top 20% for three questions. The results have worsened since 2010.

Actions taken to improve the patient experience

During 2011-2012, the Trust’s Cancer Team implemented the following initiatives in a drive to improve the cancer patient experience:

- Implementation of the National Cancer Information Prescriptions Programme across all the disease sites – this is aimed at improving the information provided to patients and their understanding of their diagnosis and treatment plan
- Almost all the Core MDT members (CNSs and Consultants) have undertaken the advanced communication skills training
- All the Lead CNSs have been trained in Cancer Level 2 Psychological assessment and support.
- Implementation of the Holistic Needs Assessment (including distress thermometer) at designated time points in the patient’s

treatment/follow up pathway.

- Trust sign up to work with Macmillan's pilot to implement the "Values Based Standard" – a quality initiative designed to deliver the NICE standards for patient experience (2012).

It is envisaged that the benefit of the above initiatives will become evident in an improvement in the Trust's results in the 2013 national cancer patient experience survey.

Please refer to the attached high level action plan for further details. Of note, the action plan focuses on the CNS workforce to create an improved cancer patient experience. This is a nationally recognised mechanism for improvement and is referenced in "The CNS contribution to cancer care", DoH 2011.

Future actions

- The Trust's progress against the NCPES action plan is, and will continue to be monitored by the Cancer Leads Team on a monthly basis
- The Cancer Leads Team will provide a quarterly update on the progress being made against the action plan to the Quality & Safety Committee.
- The Cancer Leads Team will provide an update to the local PACT Group (Patient Cancer Group) at their 6 weekly meetings
- A formal assessment of the progress of each clinical team in improving the patient experience will be undertaken as part of the Trust's Cancer Peer Review Internal Validation process in July 2013
- Following discussion at the Trust Management Team on the 25th January, it was agreed that a focus group would be used to help define areas of patient dissatisfaction in more detail.
- The cancer services team will work with the divisions to ensure this survey and actions taken are discussed during consultant appraisal.

Recommendations to the Trust Board

- To note the above report
- To accept the action plan and monitoring arrangements



National Cancer Patient Experience Programme
2011/12 National Survey

The Royal Wolverhampton Hospitals NHS Trust

Published August 2012

The National Cancer Patient Experience Survey Programme is
being undertaken by Quality Health on behalf of the Department of Health



Introduction

The Cancer Patient Experience Survey 2011/12 (CPES) follows the successful implementation of the 2010 CPES, designed to monitor national progress on cancer care. The 2011/12 survey is congruent with the National Operating Framework (NOF) for the NHS 2012/13, which defines quality as those indicators of safety, effectiveness and patient experience that indicate that standards are being maintained or improved. The CPES thus provides information that can be used to drive local quality improvements, both by Trusts and Commissioners, and is consistent with the objectives of the NOF and the Outcomes Framework.

Participating Trusts

160 acute hospital NHS Trusts providing cancer services took part in the survey. Primary Care Trusts, some of whom provide cancer services, were excluded from the survey, as were some specialist hospital Trusts because of very low patient numbers.

Patients selected to take part

The survey included all adult patients (aged 16 and over) with a primary diagnosis of cancer who had been admitted to an NHS hospital as an inpatient or as a day case patient, and had been discharged between 1st September 2011 and 30th November 2011. The three month eligibility period for data capture purposes is identical to that for the 2010 CPES.

Patients eligible for the survey were taken from Trust patient administration systems; the inclusion criteria were that the patient had an International Classification of Disease (ICD10) code of C00-99 (excluding C44 and C84) or D05. As in the 2010 survey, the types of cancer patients included significant numbers with rarer cancers as well as patients in the “Big 4” cancer groups – i.e. breast, prostate, lung, and colorectal/Lower GI. The exclusion of patients with a cancer code of C84 (for example Mycosis Fungoides) was a new development for the 2012 survey; the number of patients so excluded nationally was very small.

Trust samples were checked rigorously for duplicates and patient lists were also de-duplicated nationally to ensure that patients did not receive multiple copies of the questionnaire.

Trust samples were rigorously checked for deceased patients through the DBS system on at least three occasions during the fieldwork, to ensure that the numbers of deceased patients in samples was reduced to an absolute minimum. This process was undertaken by Quality Health and was highly effective.

Survey method

Postal surveys were sent to patients' home addresses following their discharge. Up to two reminders were sent to non-responders. A freepost envelope was included for their replies. Patients could call a free telephone line to ask questions, complete the questionnaire verbally, or to access an interpreting service.

Response rate

A total of 113,808 patients who had received treatment for cancer during September to November 2011 were included in the national sample for the Cancer Patient Experience Survey. These patients were allocated to 13 different cancer groups.

1128 eligible patients from this Trust were sent a survey, and 715 questionnaires were returned completed. This represents a response rate of 67% once deceased patients and questionnaires returned undelivered had been accounted for. The national response rate was 68% (71,793 respondents). In 2010 the national response rate was 67%.

Percentage scores

The questions in the cancer survey have been summarised as the percentage of patients who reported a positive experience. For example, "Percentage of patients who were given a complete explanation of their diagnostic tests" and "Percentage of patients who said that nurses did NOT talk in front of them as if they were not there". Neutral responses, such as "Don't know" and "I did not need an explanation" are not included in the denominator when computing the score.

The higher the score, the better the Trust's performance.

Low numbers of respondents and data not reported

Some Trusts have relatively small numbers of cancer patients, so the total number of respondents to the survey may be low despite the high response rate. Reports for these Trusts have been completed in the normal way, but the results for these Trusts need to be treated with caution. It is important to recognise however, that the low numbers of respondents in these Trusts is simply the result of low numbers of cancer patients being treated.

Patients were asked to complete the questionnaire in respect of the Trust named on the covering letter. In those Trusts without a radiotherapy or chemotherapy unit, where patients reported receiving these treatments despite these instructions, responses have been suppressed.

In almost all Trusts, there were tumour groups where the number of respondents was less than 20; this is particularly true of tumour groups representing rarer cancers. Where numbers of respondents in a particular tumour group is less than 20, we have used the convention of leaving the relevant cell blank. This is further explained in the introduction to the tumour group tables in this report.

Benchmark charts

Percentage scores are displayed on benchmark bar charts in the following section. Each bar represents the range of results across all Trusts that took part in the survey for one question. The bar is divided into:

- a red section: scores for the lowest-scoring 20% of Trusts in 2011/12
- a green section: scores for the highest-scoring 20% of Trusts in 2011/12
- an amber section: scores for the remaining 60% of Trusts in 2011/12

The black circle represents the score for this Trust. For example, if the circle is in the green section of the bar, it means that the Trust is among the top 20% of Trusts in England for that question. The line on either side of the circle shows the 95% confidence interval (the amount of uncertainty surrounding the Trust's score).

The table below each benchmarking chart shows the following: in column one, the Trust score for each question in 2010; in the second column, the Trust score for that question in 2011/12 (if this score is highlighted it means that the score is statistically significantly different from the score for 2010, with a blue highlight showing a higher value than in 2010, and a red highlight showing a lower score in 2012 than in 2010); column three represents the lower confidence interval at 95%; column four represents the upper confidence interval at 95% (the scores in columns three and four are the outer limits of the horizontal black line on the RAG chart). The fifth and sixth columns represent the upper threshold for the lowest scoring 20% of Trusts on that question and the lower threshold for the highest scoring 20% of Trusts on that question (i.e. the end of the red section and the beginning of the green section on the chart). The seventh column displays the highest Trust's score for this question in 2011/12 and the eighth column displays the number of respondents who gave this answer for this question. The ninth column displays a '+' alongside any question where the Trust's score falls within the lowest 20% of Trust scores for that question in 2011/12.

Where no Trust data or confidence interval is displayed on the RAG chart or in the tables for a particular question, there is insufficient data (below 20 respondents) to allow display.

Further information

Full details of the survey method are in the National Report of the Cancer Patient Experience Survey 2011/12, which will be available at www.quality-health.co.uk from 17th August 2012; further details of survey development, nationally agreed methodology, and cognitive testing are also available at www.quality-health.co.uk.

Who responded to the survey at this Trust?

715 patients responded to the survey from the Trust. The tables below show the numbers of patients from each tumour group and the age and sex distribution of these patients.

Respondents by tumour group

Tumour Group	Number of respondents*
Breast	139
Colorectal / Lower Gastrointestinal	105
Lung	41
Prostate	74
Brain/Central Nervous System	0
Gynaecological	66
Haematological	115
Head and Neck	50
Sarcoma	11
Skin	2
Upper Gastrointestinal	33
Urological	76
Other	3

* These figures will not match the numerator for all questions in the 'comparisons by tumour group' section of this report because not all questions were answered by all responders.

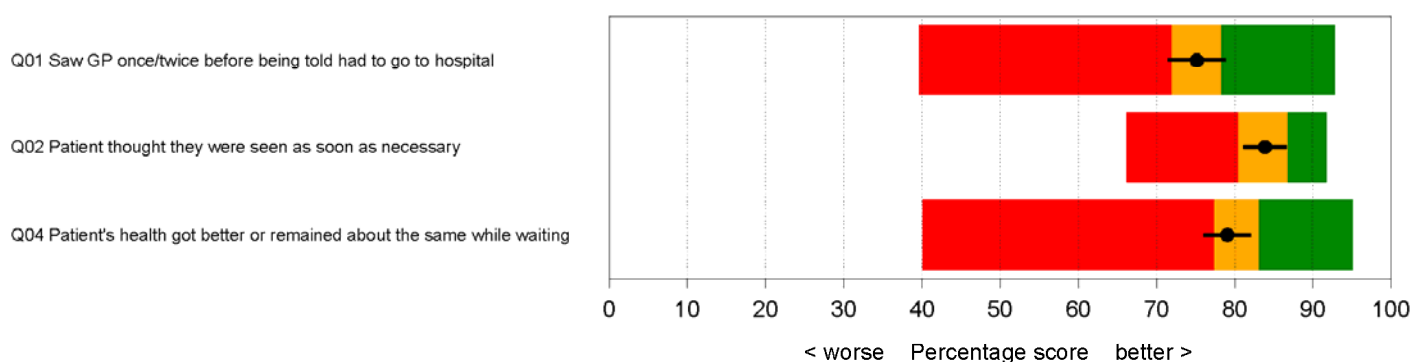
Age and sex

The survey asked respondents to give their year of birth. This information has been amalgamated into 6 age bands. 24 people did not provide their gender or age. Of the 691 who did, the age and gender distribution for the Trust was as follows:

	16-25	26-35	36-50	51-65	66-75	75+	Missing	Total
Men	0	4	14	93	118	75	12	316
Women	2	3	52	137	101	72	8	375
Total	2	7	66	230	219	147	20	691

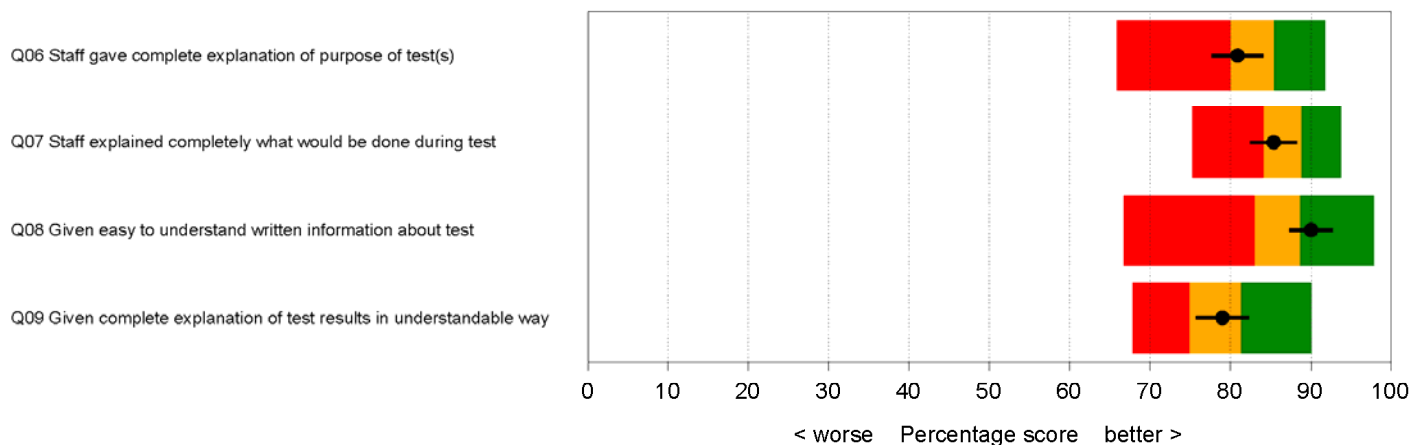
Trust results

Seeing your GP



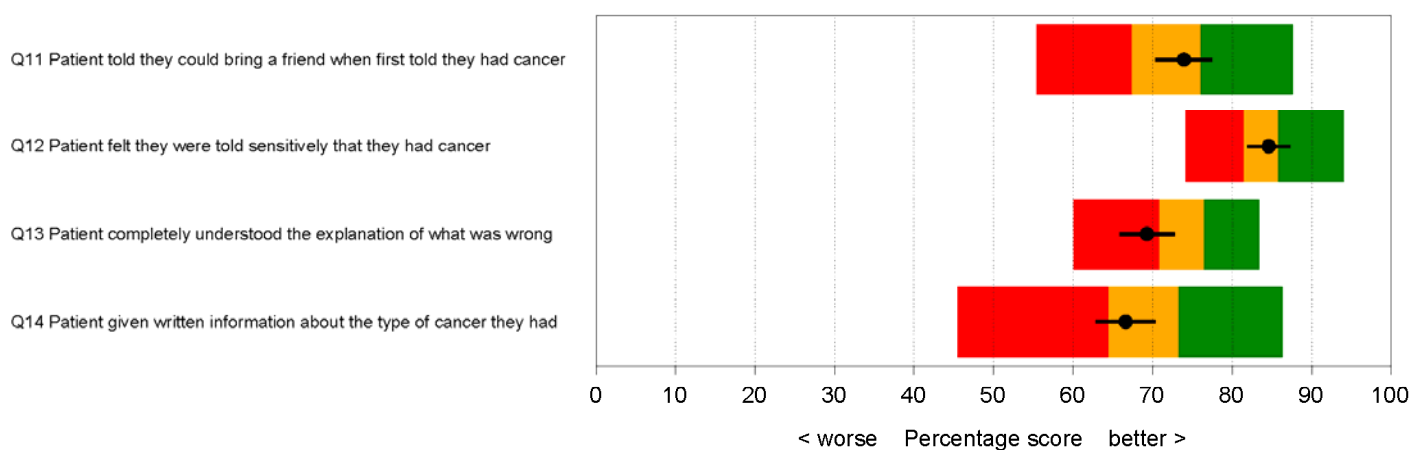
Question	2010 Percentage for this Trust	2012 Percentage for this Trust	Lower 95% confidence interval	Upper 95% confidence interval	Threshold for lowest scoring 20% of all Trusts	Threshold for highest scoring 20% of all Trusts	Highest Trust's percentage score	Number of responders for this Trust	Scored % in lowest 20% of Trusts 2012
Q1 Saw GP once/twice before being told had to go to hospital	74%	75%	71%	79%	72%	78%	93%	519	
Q2 Patient thought they were seen as soon as necessary	83%	84%	81%	87%	80%	87%	92%	688	
Q4 Patient's health got better or remained about the same while waiting	75%	79%	76%	82%	77%	83%	95%	687	

Diagnostic tests



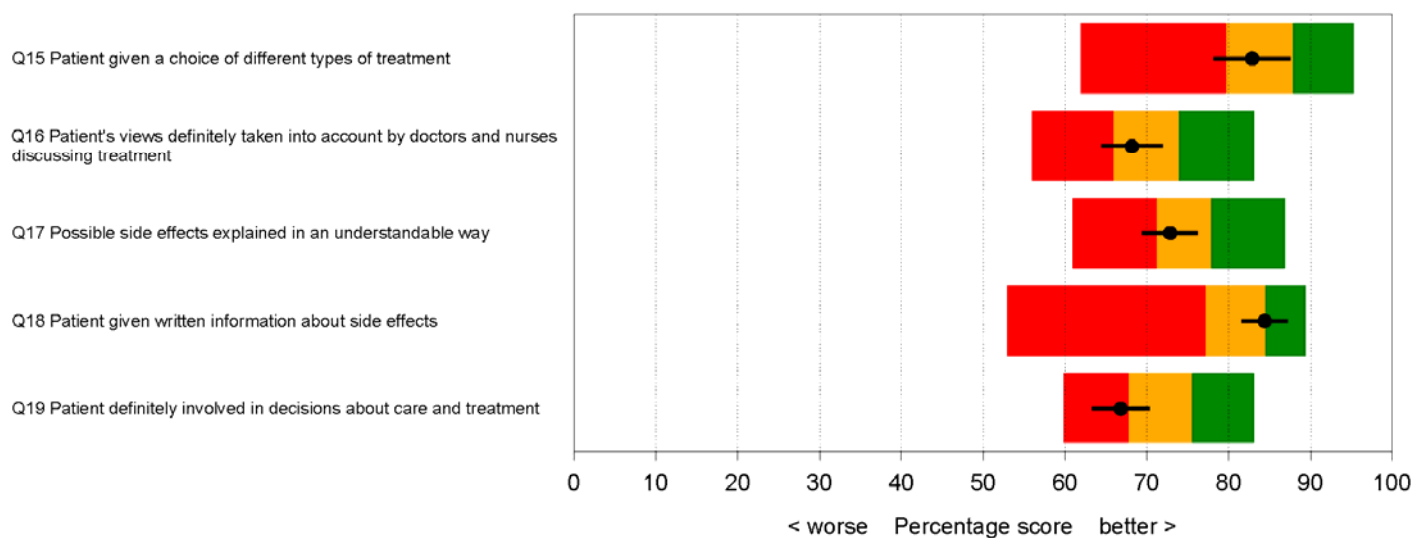
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Q6 Staff gave complete explanation of purpose of test(s)	82%	81%	78%	84%	80%	85%	92%	581	
Q7 Staff explained completely what would be done during test	87%	85%	82%	88%	84%	89%	94%	581	
Q8 Given easy to understand written information about test	89%	90%	87%	93%	83%	89%	98%	491	
Q9 Given complete explanation of test results in understandable way	77%	79%	76%	82%	75%	81%	90%	600	

Finding out what was wrong with you



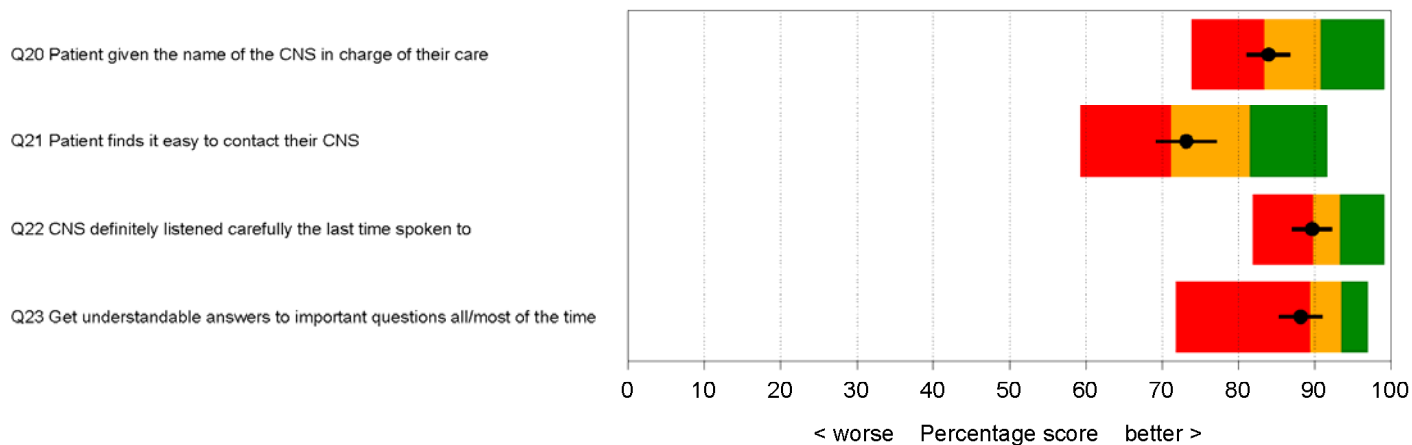
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Q11	76%	74%	70%	77%	67%	76%	88%	595	
Q12	85%	85%	82%	87%	81%	86%	94%	701	
Q13	74%	69%	66%	73%	71%	76%	83%	697	+
Q14	70%	67%	63%	70%	64%	73%	86%	611	

Deciding the best treatment for you



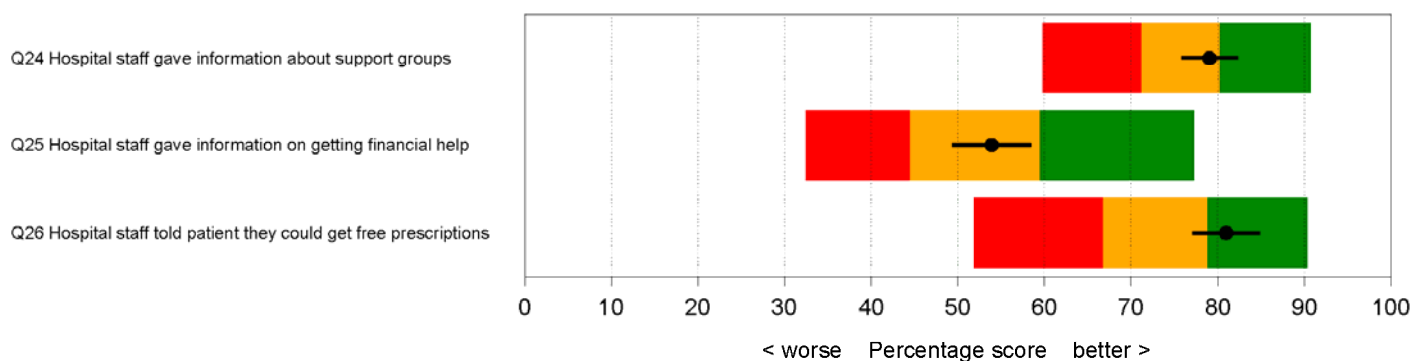
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Q15 Patient given a choice of different types of treatment	84%	83%	78%	88%	80%	88%	95%	251	
Q16 Patient's views definitely taken into account by doctors and nurses discussing treatment	-	68%	64%	72%	66%	74%	83%	588	
Q17 Possible side effects explained in an understandable way	77%	73%	69%	76%	71%	78%	87%	663	
Q18 Patient given written information about side effects	84%	84%	82%	87%	77%	84%	89%	661	
Q19 Patient definitely involved in decisions about care and treatment	73%	67%	63%	70%	68%	76%	83%	681	+

Clinical Nurse Specialist



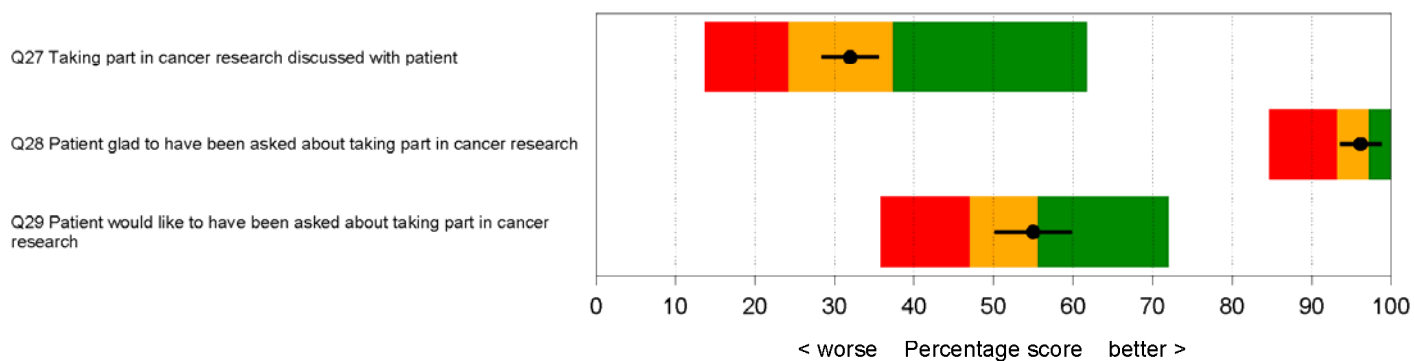
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Q20	Patient given the name of the CNS in charge of their care	83%	84%	81%	87%	83%	91%	99%	653	
Q21	Patient finds it easy to contact their CNS	77%	73%	69%	77%	71%	81%	92%	488	
Q22	CNS definitely listened carefully the last time spoken to	94%	90%	87%	92%	90%	93%	99%	531	+
Q23	Get understandable answers to important questions all/most of the time	90%	88%	85%	91%	89%	94%	97%	489	+

Support for people with cancer



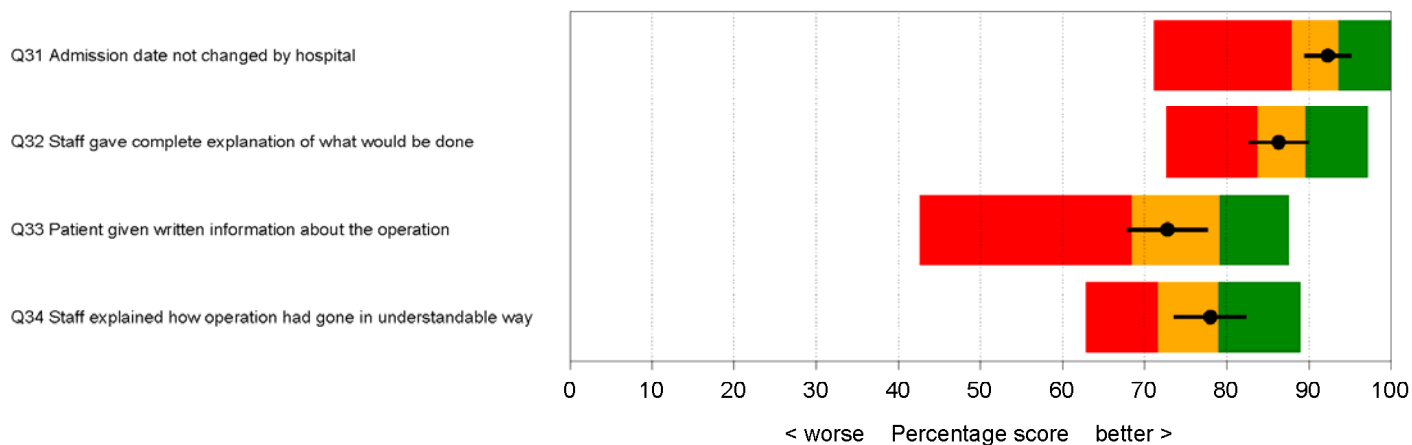
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Q24 Hospital staff gave information about support groups	83%	79%	76%	82%	71%	80%	91%	606	
Q25 Hospital staff gave information on getting financial help	56%	54%	49%	58%	44%	59%	77%	460	
Q26 Hospital staff told patient they could get free prescriptions	78%	81%	77%	85%	67%	79%	90%	399	

Cancer research



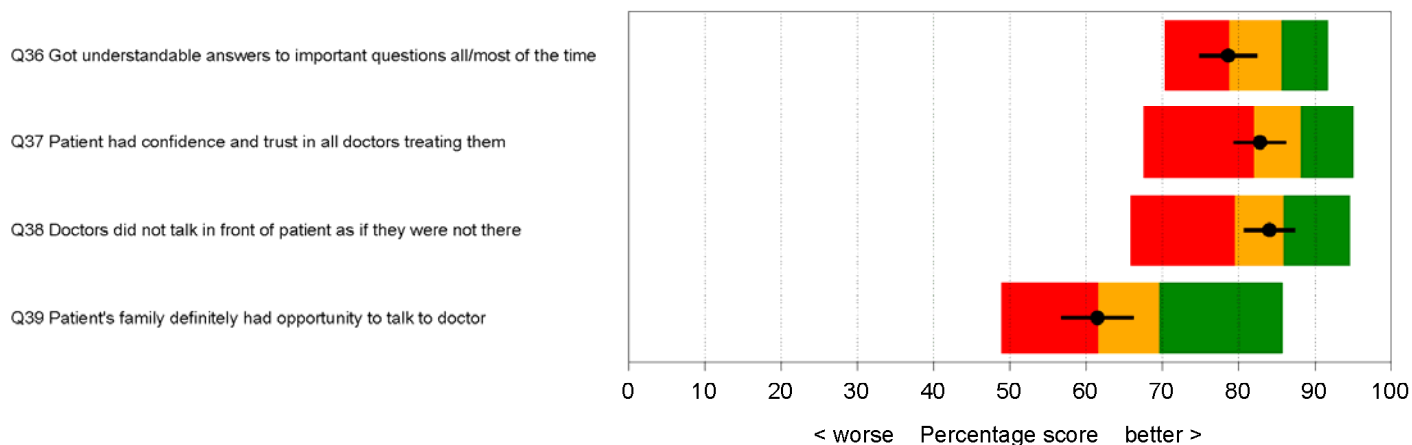
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Q27	Taking part in cancer research discussed with patient	-	32%	28%	36%	24%	37%	62%	660	
Q28	Patient glad to have been asked about taking part in cancer research	-	96%	94%	99%	93%	97%	100%	208	
Q29	Patient would like to have been asked about taking part in cancer research	-	55%	50%	60%	47%	56%	72%	413	

Operations



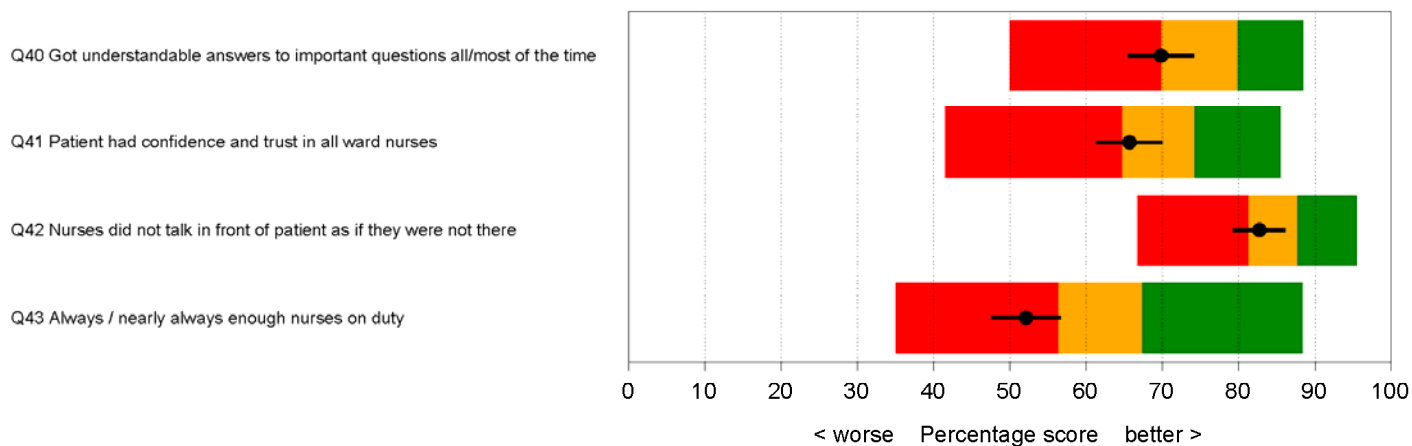
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Q31 Admission date not changed by hospital	93%	92%	89%	95%	88%	94%	100%	350	
Q32 Staff gave complete explanation of what would be done	88%	86%	83%	90%	84%	90%	97%	343	
Q33 Patient given written information about the operation	72%	73%	68%	78%	69%	79%	88%	323	
Q34 Staff explained how operation had gone in understandable way	74%	78%	74%	82%	72%	79%	89%	345	

Hospital doctors



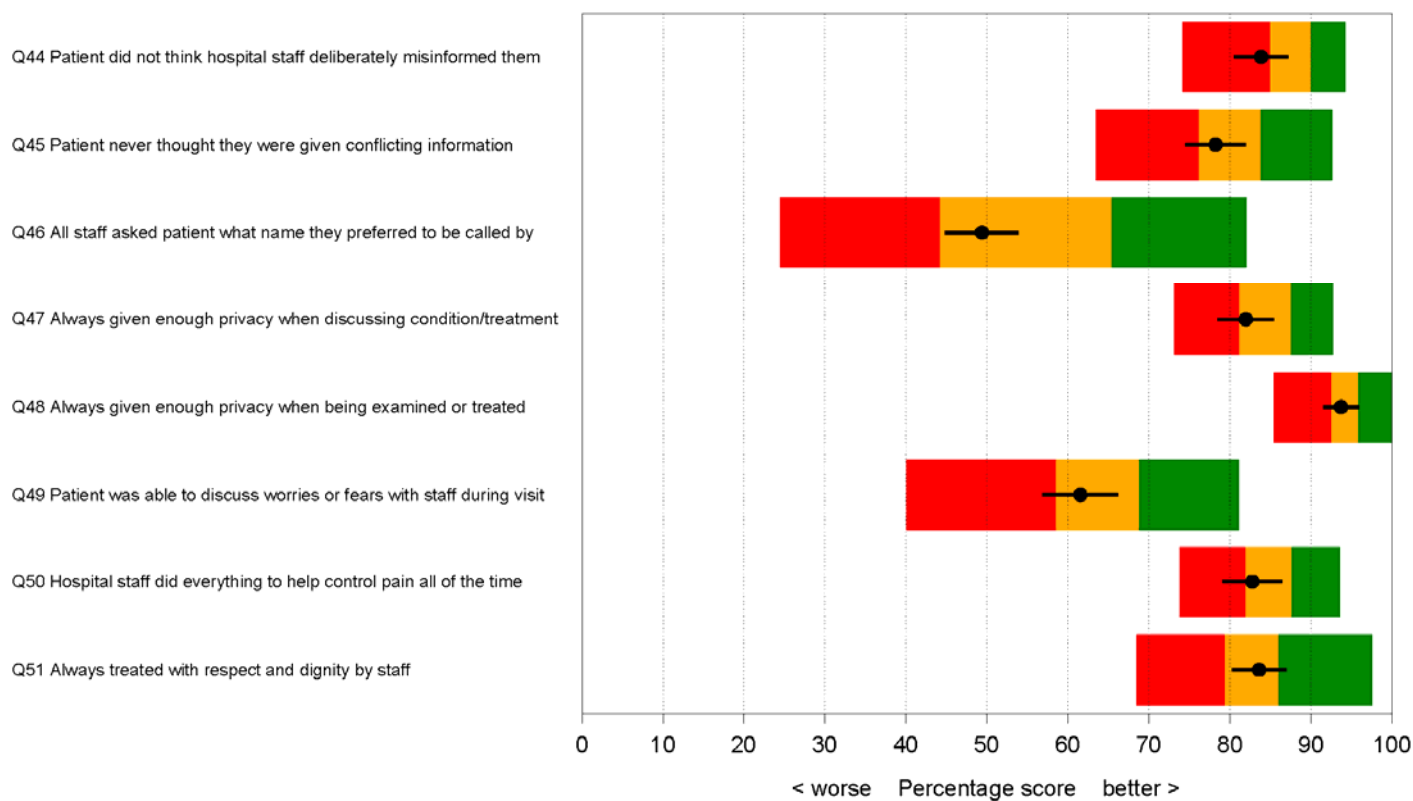
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Q36 Got understandable answers to important questions all/most of the time	82%	79%	75%	82%	79%	86%	92%	454	+
Q37 Patient had confidence and trust in all doctors treating them	85%	83%	79%	86%	82%	88%	95%	477	
Q38 Doctors did not talk in front of patient as if they were not there	84%	84%	81%	87%	80%	86%	95%	476	
Q39 Patient's family definitely had opportunity to talk to doctor	71%	62%	57%	66%	62%	70%	86%	413	+

Ward nurses



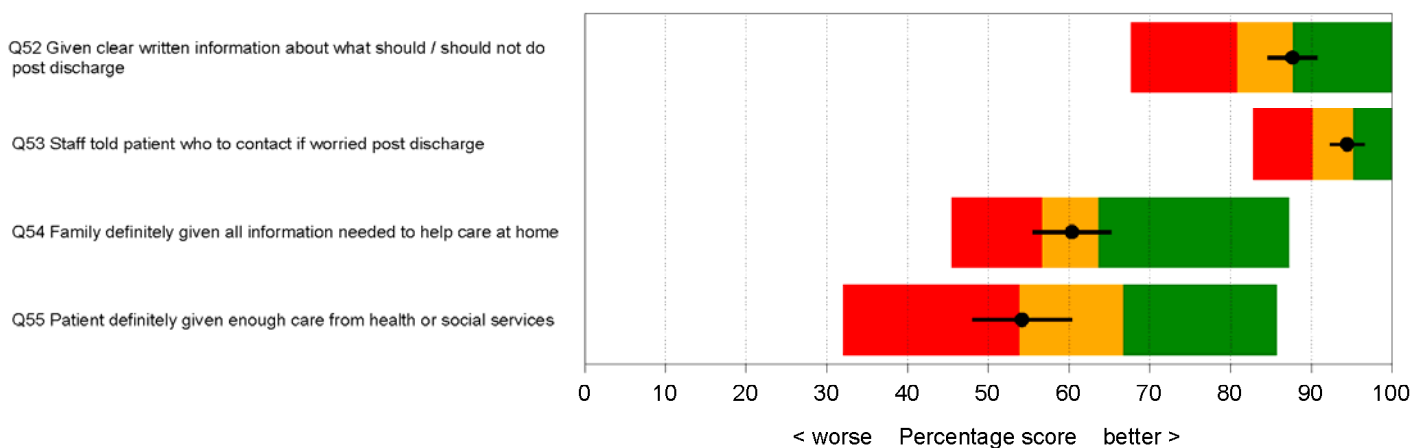
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Q40	Got understandable answers to important questions all/most of the time	72%	70%	66%	74%	70%	80%	88%	431	+
Q41	Patient had confidence and trust in all ward nurses	68%	66%	61%	70%	65%	74%	85%	475	
Q42	Nurses did not talk in front of patient as if they were not there	83%	83%	79%	86%	81%	88%	95%	474	
Q43	Always / nearly always enough nurses on duty	57%	52%	48%	57%	56%	67%	88%	472	+

Hospital care and treatment



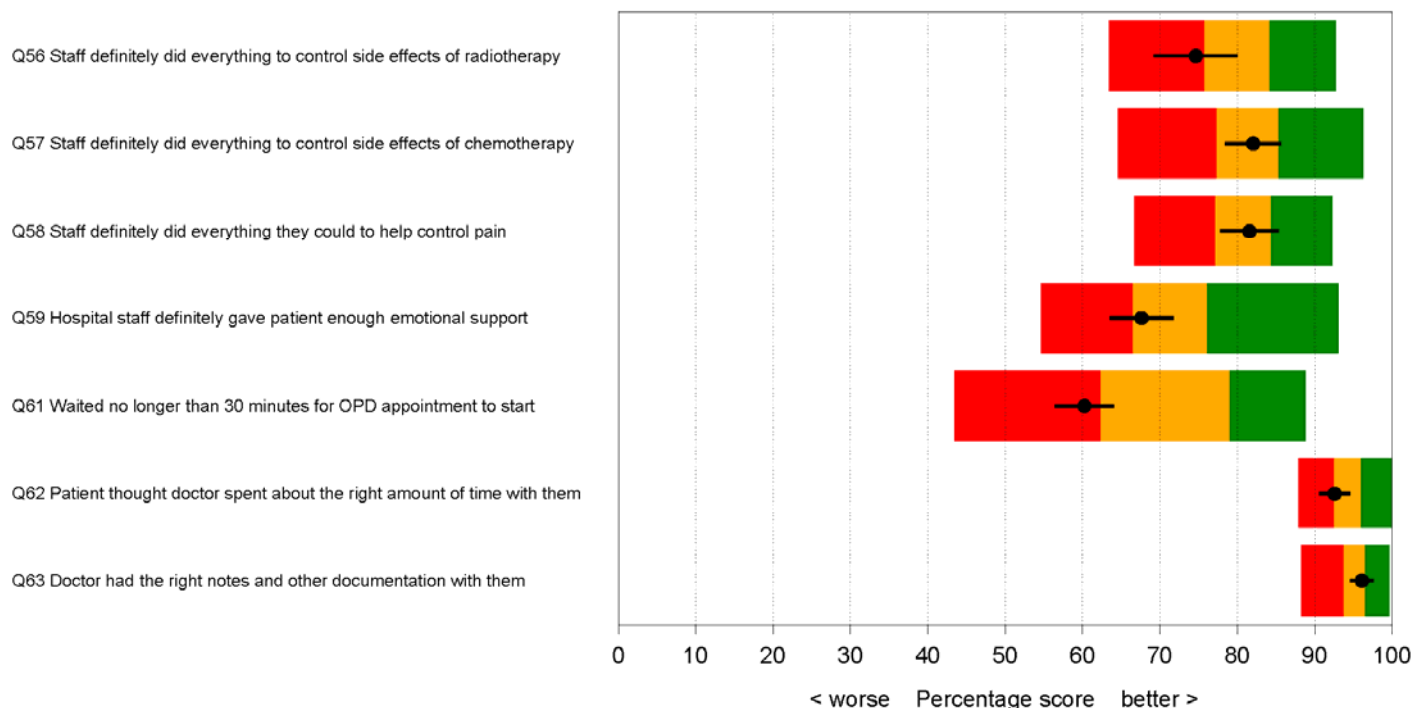
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Q44 Patient did not think hospital staff deliberately misled them	87%	84%	81%	87%	85%	90%	94%	476	+
Q45 Patient never thought they were given conflicting information	80%	78%	75%	82%	76%	84%	93%	473	
Q46 All staff asked patient what name they preferred to be called by	-	49%	45%	54%	44%	65%	82%	474	
Q47 Always given enough privacy when discussing condition/treatment	87%	82%	78%	85%	81%	87%	93%	476	
Q48 Always given enough privacy when being examined or treated	96%	94%	91%	96%	93%	96%	100%	475	
Q49 Patient was able to discuss worries or fears with staff during visit	-	62%	57%	66%	59%	69%	81%	421	
Q50 Hospital staff did everything to help control pain all of the time	84%	83%	79%	86%	82%	88%	93%	417	
Q51 Always treated with respect and dignity by staff	83%	84%	80%	87%	79%	86%	98%	475	

Information given to you before leaving hospital and home support



Question	2010 Percentage for this Trust	2012 Percentage for this Trust	Lower 95% confidence interval	Upper 95% confidence interval	Threshold for lowest scoring 20% of all Trusts	Threshold for highest scoring 20% of all Trusts	Highest Trust's percentage score	Number of responders for this Trust	Scored % in lowest 20% of Trusts 2012
Q52 Given clear written information about what should / should not do post discharge	86%	88%	85%	91%	81%	88%	100%	453	
Q53 Staff told patient who to contact if worried post discharge	94%	94%	92%	96%	90%	95%	100%	465	
Q54 Family definitely given all information needed to help care at home	61%	60%	56%	65%	57%	64%	87%	396	
Q55 Patient definitely given enough care from health or social services	60%	54%	48%	60%	54%	67%	86%	253	

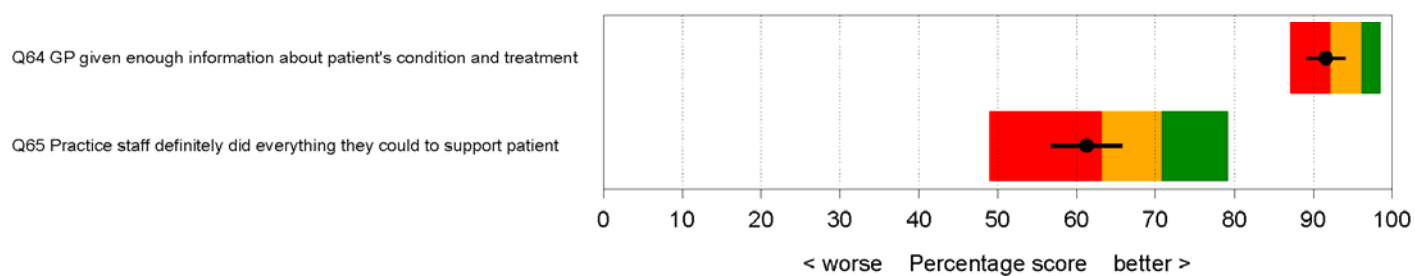
Hospital care as a day patient / outpatient



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Q56 Staff definitely did everything to control side effects of radiotherapy		75%	69%	80%	76%	84%	93%	256	+
Q57 Staff definitely did everything to control side effects of chemotherapy	88%*	82%	78%	86%	77%	85%	96%	439	
Q58 Staff definitely did everything they could to help control pain	83%	82%	78%	85%	77%	84%	92%	412	
Q59 Hospital staff definitely gave patient enough emotional support	77%	68%	63%	72%	66%	76%	93%	494	
Q61 Waited no longer than 30 minutes for OPD appointment to start	53%	-	56%	64%	62%	79%	89%	641	+
Q62 Patient thought doctor spent about the right amount of time with them	94%	93%	91%	95%	92%	96%	100%	671	
Q63 Doctor had the right notes and other documentation with them	95%	96%	95%	98%	94%	96%	100%	635	

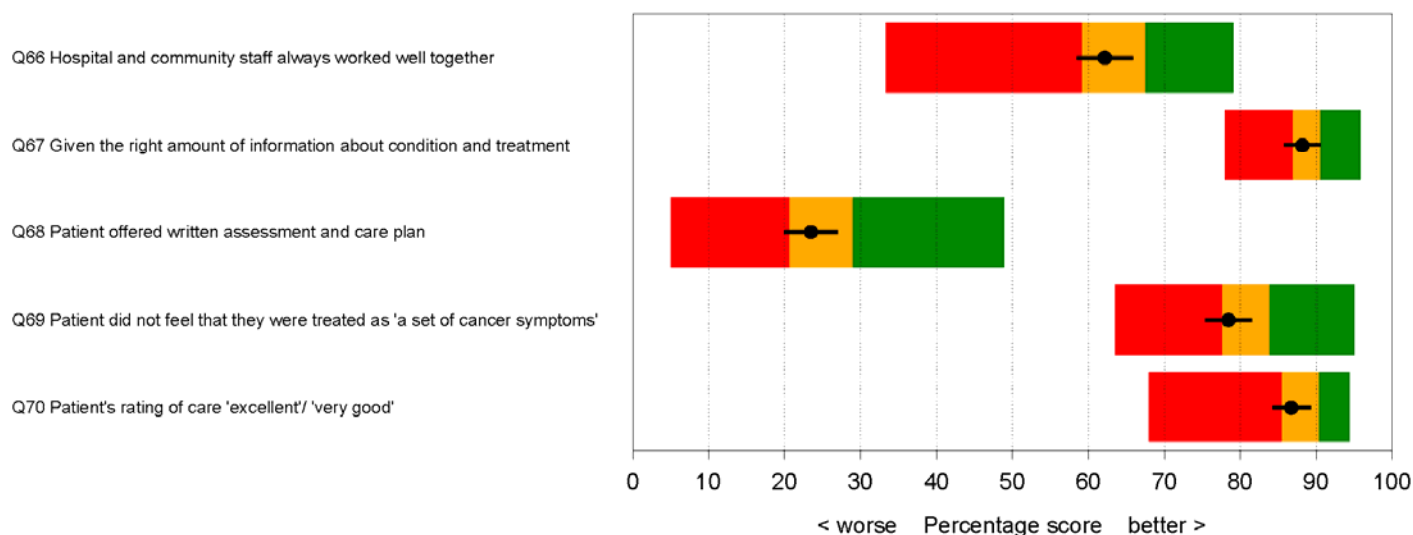
* The wording of questions 56 and 57 was changed in this year's survey and while the questions are not strictly comparable last year's data has been left in for information.

Care from your general practice



Question		2010 Percentage for this Trust	2012 Percentage for this Trust	Lower 95% confidence interval	Upper 95% confidence interval	Threshold for lowest scoring 20% of all Trusts	Threshold for highest scoring 20% of all Trusts	Highest Trust's percentage score	Number of responders for this Trust	Scored % in lowest 20% of Trusts 2012
Q64	GP given enough information about patient's condition and treatment	94%	92%	89%	94%	92%	96%	99%	511	+
Q65	Practice staff definitely did everything they could to support patient	68%	61%	57%	66%	63%	71%	79%	457	+

Your overall NHS care



Question		2010 Percentage for this Trust	2012 Percentage for this Trust	Lower 95% confidence interval	Upper 95% confidence interval	Threshold for lowest scoring 20% of all Trusts	Threshold for highest scoring 20% of all Trusts	Highest Trust's percentage score	Number of responders for this Trust	Scored % in lowest 20% of Trusts 2012
Q66	Hospital and community staff always worked well together	67%	62%	58%	66%	59%	68%	79%	666	
Q67	Given the right amount of information about condition and treatment	91%	88%	86%	91%	87%	91%	96%	693	
Q68	Patient offered written assessment and care plan	-	23%	20%	27%	21%	29%	49%	575	
Q69	Patient did not feel that they were treated as a 'set of cancer symptoms'	80%	78%	75%	82%	78%	84%	95%	687	
Q70	Patient's rating of care 'excellent'/'very good'	-	87%	84%	89%	85%	90%	94%	692	

Comparisons by tumour group for this Trust

The following tables show the Trust and the national percentage scores for each question broken down by tumour group. Where a cell in the table is blank this indicates that the number of patients in that group was below 20 and too small to display.

Seeing your GP

Cancer type	Q1. Saw GP once/twice before being told had to go to hospital		Q2. Patient thought they were seen as soon as necessary		Q4. Patient's health got better or remained about the same while waiting	
	This Trust	National	This Trust	National	This Trust	National
Breast	90%	92%	92%	90%	93%	93%
Colorectal / Lower Gastro	78%	70%	83%	80%	77%	76%
Lung	62%	66%	86%	84%	75%	74%
Prostate	76%	76%	91%	86%	89%	88%
Brain / CNS						
Gynaecological	73%	72%	78%	80%	63%	72%
Haematological	60%	62%	74%	81%	67%	68%
Head & Neck	80%	73%	80%	79%	84%	79%
Sarcoma						
Skin						
Upper Gastro	66%	68%	70%	78%	67%	67%
Urological	84%	79%	90%	85%	85%	86%
Other Cancers						
All cancers	75%	74%	84%	83%	79%	79%

Diagnostic tests

Cancer type	Q6. Staff gave complete explanation of purpose of test(s)		Q7. Staff explained completely what would be done during test		Q8. Given easy to understand written information about test		Q9. Given complete explanation of test results in an understandable way	
	This Trust	National	This Trust	National	This Trust	National	This Trust	National
Breast	82%	86%	89%	87%	88%	87%	76%	81%
Colorectal / Lower Gastro	83%	82%	85%	87%	86%	89%	77%	79%
Lung	86%	83%	86%	87%	100%	87%	92%	78%
Prostate	78%	86%	88%	89%	94%	89%	81%	79%
Brain / CNS								
Gynaecological	76%	79%	85%	84%	93%	85%	73%	75%
Haematological	86%	82%	88%	86%	90%	84%	79%	74%
Head & Neck	78%	81%	80%	84%	76%	80%	83%	77%
Sarcoma								
Skin								
Upper Gastro	74%	79%	85%	86%	93%	86%	79%	75%
Urological	85%	81%	80%	85%	97%	86%	81%	77%
Other Cancers								
All cancers	81%	83%	85%	86%	90%	86%	79%	78%

Finding out what was wrong with you

Cancer type	Q11. Patient told they could bring a friend when first told they had cancer		Q12. Patient felt they were told sensitively that they had cancer		Q13. Patient completely understood the explanation of what was wrong		Q14. Patient given written information about the type of cancer they had	
	This Trust	National	This Trust	National	This Trust	National	This Trust	National
Breast	84%	80%	90%	87%	79%	79%	66%	75%
Colorectal / Lower Gastro	79%	77%	83%	84%	73%	79%	64%	68%
Lung	78%	75%	74%	82%	79%	75%	49%	62%
Prostate	70%	70%	88%	83%	74%	76%	81%	78%
Brain / CNS								
Gynaecological	67%	66%	80%	80%	63%	72%	65%	65%
Haematological	72%	65%	84%	82%	48%	57%	74%	71%
Head & Neck	61%	69%	84%	85%	76%	74%	63%	58%
Sarcoma								
Skin								
Upper Gastro	72%	72%	79%	79%	76%	73%	58%	62%
Urological	69%	65%	86%	81%	70%	76%	69%	66%
Other Cancers								
All cancers	74%	72%	85%	83%	69%	73%	67%	69%

Deciding the best treatment for you

Cancer type	Q15. Patient given a choice of different types of treatment		Q16. Patient's views definitely taken into account by doctors and nurses discussing treatment		Q17. Possible side effects explained in an understandable way		Q18. Patient given written information about side effects	
	This Trust	National	This Trust	National	This Trust	National	This Trust	National
Breast	80%	88%	76%	72%	76%	79%	90%	90%
Colorectal / Lower Gastro	79%	83%	71%	70%	71%	77%	86%	83%
Lung	88%	83%	88%	70%	68%	77%	79%	84%
Prostate	90%	90%	67%	74%	73%	74%	85%	81%
Brain / CNS								
Gynaecological	88%	81%	63%	69%	73%	76%	89%	84%
Haematological	86%	80%	60%	68%	75%	72%	80%	80%
Head & Neck	72%	83%	67%	69%	75%	71%	84%	73%
Sarcoma								
Skin								
Upper Gastro	78%	82%	69%	67%	70%	73%	83%	81%
Urological	87%	75%	60%	65%	69%	69%	82%	70%
Other Cancers								
All cancers	83%	84%	68%	70%	73%	75%	84%	81%

Cancer type	Q19. Patient definitely involved in decisions about care and treatment	
	This Trust	National
Breast	68%	74%
Colorectal / Lower Gastro	67%	73%
Lung	78%	73%
Prostate	72%	74%
Brain / CNS		
Gynaecological	64%	73%
Haematological	65%	71%
Head & Neck	65%	69%
Sarcoma		
Skin		
Upper Gastro	65%	69%
Urological	63%	67%
Other Cancers		
All cancers	67%	72%

Clinical Nurse Specialist

Cancer type	Q20. Patient given the name of the CNS in charge of their care		Q21. Patient finds it easy to contact their CNS		Q22. CNS definitely listened carefully the last time spoken to		Q23. Get understandable answers to important questions all/most of the time	
	This Trust	National	This Trust	National	This Trust	National	This Trust	National
Breast	86%	93%	71%	73%	90%	91%	84%	92%
Colorectal / Lower Gastro	78%	90%	71%	78%	88%	92%	90%	92%
Lung	82%	90%	87%	76%	90%	91%	89%	90%
Prostate	88%	85%	76%	72%	92%	92%	89%	91%
Brain / CNS								
Gynaecological	90%	91%	84%	73%	86%	89%	94%	89%
Haematological	87%	85%	69%	76%	87%	92%	86%	91%
Head & Neck	90%	83%	54%	73%	93%	90%	93%	90%
Sarcoma								
Skin								
Upper Gastro	81%	89%	82%	74%	92%	91%	86%	91%
Urological	72%	75%	74%	74%	90%	93%	87%	91%
Other Cancers								
All cancers	84%	87%	73%	75%	90%	91%	88%	91%

Support for people with cancer

Cancer type	Q24. Hospital staff gave information about support groups		Q25. Hospital staff gave information on getting financial help		Q26. Hospital staff told patient they could get free prescriptions	
	This Trust	National	This Trust	National	This Trust	National
Breast	83%	85%	62%	56%	87%	71%
Colorectal / Lower Gastro	81%	75%	56%	49%	91%	76%
Lung	76%	80%	59%	70%	79%	82%
Prostate	83%	78%	38%	38%	65%	71%
Brain / CNS						
Gynaecological	84%	77%	57%	56%	78%	70%
Haematological	76%	74%	47%	53%	81%	79%
Head & Neck	82%	76%	66%	57%	86%	77%
Sarcoma						
Skin						
Upper Gastro	77%	76%	55%	53%	81%	77%
Urological	62%	57%	39%	29%	52%	61%
Other Cancers						
All cancers	79%	76%	54%	52%	81%	73%

Cancer research

Cancer type	Q27. Taking part in cancer research discussed with patient		Q28. Patient glad to have been asked about taking part in cancer research		Q29. Patient would like to have been asked about taking part in cancer research	
	This Trust	National	This Trust	National	This Trust	National
Breast	48%	39%	97%	94%	51%	56%
Colorectal / Lower Gastro	43%	36%	92%	95%	52%	51%
Lung	29%	35%			50%	53%
Prostate	10%	35%			51%	54%
Brain / CNS						
Gynaecological	22%	28%			62%	51%
Haematological	48%	33%	98%	97%	57%	53%
Head & Neck	12%	24%			73%	54%
Sarcoma						
Skin						
Upper Gastro	25%	38%			52%	54%
Urological	16%	15%			53%	47%
Other Cancers						
All cancers	32%	33%	96%	95%	55%	53%

Operations

Cancer type	Q31. Admission date not changed by hospital		Q32. Staff gave complete explanation of what would be done		Q33. Patient given written information about the operation		Q34. Staff explained how operation had gone in understandable way	
	This Trust	National	This Trust	National	This Trust	National	This Trust	National
Breast	97%	95%	90%	89%	76%	82%	77%	75%
Colorectal / Lower Gastro	95%	91%	84%	85%	66%	71%	81%	77%
Lung								
Prostate	81%	85%	100%	87%	85%	83%	90%	73%
Brain / CNS								
Gynaecological	88%	90%	87%	85%	85%	75%	68%	77%
Haematological								
Head & Neck	93%	90%	90%	86%	71%	63%	77%	74%
Sarcoma								
Skin								
Upper Gastro								
Urological	93%	86%	81%	86%	75%	71%	73%	71%
Other Cancers								
All cancers	92%	90%	86%	87%	73%	73%	78%	75%

Hospital Doctors

Cancer type	Q36. Got understandable answers to important questions all/most of the time		Q37. Patient had confidence and trust in all doctors treating them		Q38. Doctors did not talk in front of patient as if they were not there		Q39. Patient's family definitely had opportunity to talk to doctor	
	This Trust	National	This Trust	National	This Trust	National	This Trust	National
Breast	78%	85%	80%	86%	87%	89%	61%	69%
Colorectal / Lower Gastro	80%	83%	86%	86%	81%	79%	70%	63%
Lung	96%	79%	96%	82%	81%	80%	64%	66%
Prostate	83%	84%	90%	88%	90%	84%	58%	66%
Brain / CNS								
Gynaecological	82%	83%	84%	85%	92%	86%	65%	65%
Haematological	73%	82%	80%	82%	83%	81%	58%	67%
Head & Neck	79%	82%	85%	86%	73%	80%	61%	66%
Sarcoma								
Skin								
Upper Gastro								
Urological	73%	78%	72%	86%	81%	80%	57%	59%
Other Cancers								
All cancers	79%	82%	83%	85%	84%	83%	62%	65%

Ward Nurses

Cancer type	Q40. Got understandable answers to important questions all/most of the time		Q41. Patient had confidence and trust in all ward nurses		Q42. Nurses did not talk in front of patient as if they were not there		Q43. Always / nearly always enough nurses on duty	
	This Trust	National	This Trust	National	This Trust	National	This Trust	National
Breast	55%	77%	53%	70%	78%	88%	45%	64%
Colorectal / Lower Gastro	76%	74%	70%	66%	81%	82%	45%	57%
Lung	71%	74%	65%	70%	81%	82%	62%	63%
Prostate	77%	76%	80%	71%	93%	86%	48%	63%
Brain / CNS								
Gynaecological	81%	74%	76%	67%	90%	84%	59%	60%
Haematological	80%	77%	71%	71%	85%	85%	50%	58%
Head & Neck	72%	75%	76%	68%	83%	84%	71%	61%
Sarcoma								
Skin								
Upper Gastro								
Urological	60%	74%	59%	73%	83%	84%	50%	63%
Other Cancers								
All cancers	70%	75%	66%	69%	83%	84%	52%	61%

Hospital care and treatment

Cancer type	Q44. Patient did not think hospital staff deliberately misinformed them		Q45. Patient never thought they were given conflicting information		Q46. All staff asked patient what name they preferred to be called by		Q47. Always given enough privacy when discussing condition or treatment	
	This Trust	National	This Trust	National	This Trust	National	This Trust	National
Breast	86%	91%	71%	82%	37%	49%	81%	85%
Colorectal / Lower Gastro	85%	87%	77%	77%	61%	61%	84%	83%
Lung	88%	84%	88%	78%	46%	64%	77%	84%
Prostate	90%	90%	97%	85%	42%	52%	90%	86%
Brain / CNS								
Gynaecological	84%	86%	82%	78%	53%	51%	86%	82%
Haematological	73%	86%	73%	74%	55%	57%	77%	85%
Head & Neck	83%	86%	83%	78%	40%	56%	85%	85%
Sarcoma								
Skin								
Upper Gastro								
Urological	83%	87%	77%	82%	56%	61%	84%	84%
Other Cancers								
All cancers	84%	87%	78%	79%	49%	56%	82%	84%

Cancer type	Q48. Always given enough privacy when being examined or treated		Q49. Patient was able to discuss worries or fears with staff during visit		Q50. Hospital staff did everything to help control pain all of the time		Q51. Always treated with respect and dignity by staff	
	This Trust	National	This Trust	National	This Trust	National	This Trust	National
Breast	90%	94%	53%	65%	77%	88%	71%	83%
Colorectal / Lower Gastro	93%	94%	65%	63%	84%	84%	85%	80%
Lung	92%	94%	70%	63%	83%	83%	100%	83%
Prostate	97%	94%	62%	66%	79%	86%	87%	84%
Brain / CNS								
Gynaecological	94%	94%	57%	60%	89%	84%	88%	82%
Haematological	97%	94%	66%	65%	87%	85%	92%	84%
Head & Neck	93%	93%	68%	65%	95%	84%	90%	85%
Sarcoma								
Skin								
Upper Gastro								
Urological	98%	94%	54%	62%	73%	82%	77%	83%
Other Cancers								
All cancers	94%	94%	62%	64%	83%	84%	84%	83%

Information given to you before you left hospital and home support

Cancer type	Q52. Given clear written information about what should / should not do post discharge		Q53. Staff told patient who to contact if worried post discharge		Q54. Family definitely given all information needed to help care at home		Q55. Patient definitely given enough care from health or social services	
	This Trust	National	This Trust	National	This Trust	National	This Trust	National
Breast	89%	90%	97%	96%	54%	60%	35%	62%
Colorectal / Lower Gastro	85%	82%	94%	94%	67%	60%	71%	68%
Lung	75%	82%	88%	92%	58%	62%	40%	59%
Prostate	97%	84%	100%	92%	75%	62%	93%	57%
Brain / CNS								
Gynaecological	98%	84%	100%	93%	63%	56%	33%	58%
Haematological	82%	82%	91%	96%	56%	65%	46%	59%
Head & Neck	92%	85%	92%	92%	71%	64%	63%	57%
Sarcoma								
Skin								
Upper Gastro								
Urological	86%	81%	94%	88%	48%	56%	41%	51%
Other Cancers								
All cancers	88%	84%	94%	93%	60%	60%	54%	61%

Hospital care as a day patient / outpatient

Cancer type	Q56. Staff definitely did everything to control side effects of radiotherapy		Q57. Staff definitely did everything to control side effects of chemotherapy		Q58. Staff definitely did everything they could to help control pain		Q59. Hospital staff definitely gave patient enough emotional support	
	This Trust	National	This Trust	National	This Trust	National	This Trust	National
Breast	78%	81%	86%	81%	82%	82%	65%	68%
Colorectal / Lower Gastro	65%	79%	82%	83%	76%	82%	70%	73%
Lung	63%	79%	84%	84%	88%	83%	86%	74%
Prostate	72%	79%	79%	80%	75%	78%	69%	73%
Brain / CNS								
Gynaecological	63%	80%	82%	82%	85%	82%	73%	69%
Haematological	81%	79%	84%	81%	86%	84%	66%	73%
Head & Neck	81%	78%	77%	79%	81%	82%	65%	69%
Sarcoma								
Skin								
Upper Gastro	100%	79%	90%	80%	94%	81%	70%	68%
Urological	71%	73%	59%	74%	73%	76%	56%	69%
Other Cancers								
All cancers	75%	79%	82%	81%	82%	81%	68%	71%

Cancer type	Q61. Waited no longer than 30 minutes for OPD appointment to start		Q62. Patient thought doctor spent about the right amount of time with them		Q63. Doctor had the right notes and other documentation with them	
	This Trust	National	This Trust	National	This Trust	National
Breast	54%	65%	95%	92%	96%	95%
Colorectal / Lower Gastro	52%	72%	87%	94%	98%	95%
Lung	59%	73%	85%	95%	95%	95%
Prostate	57%	76%	96%	93%	94%	95%
Brain / CNS						
Gynaecological	61%	69%	94%	94%	97%	96%
Haematological	66%	65%	95%	95%	96%	95%
Head & Neck	49%	70%	87%	93%	100%	95%
Sarcoma						
Skin						
Upper Gastro	53%	71%	91%	94%	93%	94%
Urological	86%	77%	96%	95%	93%	95%
Other Cancers						
All cancers	60%	70%	93%	94%	96%	95%

Care from your general practice

Cancer type	Q64. GP given enough information about patient's condition and treatment		Q65. Practice staff definitely did everything they could to support patient	
	This Trust	National	This Trust	National
Breast	92%	95%	61%	66%
Colorectal / Lower Gastro	99%	94%	61%	69%
Lung	94%	94%	61%	67%
Prostate	90%	95%	73%	72%
Brain / CNS				
Gynaecological	89%	94%	64%	64%
Haematological	87%	94%	52%	64%
Head & Neck	90%	92%	57%	63%
Sarcoma				
Skin				
Upper Gastro	88%	93%	64%	68%
Urological	92%	94%	51%	69%
Other Cancers				
All cancers	92%	94%	61%	67%

Your overall NHS care

Cancer type	Q66. Hospital and community staff always worked well together		Q67. Given the right amount of information about condition and treatment		Q68. Patient offered written assessment and care plan		Q69. Patient did not feel that they were treated as 'a set of cancer symptoms'	
	This Trust	National	This Trust	National	This Trust	National	This Trust	National
Breast	57%	63%	87%	89%	21%	26%	76%	78%
Colorectal / Lower Gastro	64%	62%	88%	89%	27%	27%	79%	81%
Lung	74%	64%	88%	88%	25%	25%	85%	77%
Prostate	66%	64%	89%	89%	19%	25%	85%	82%
Brain / CNS								
Gynaecological	58%	60%	88%	88%	23%	22%	74%	78%
Haematological	63%	64%	90%	91%	26%	23%	79%	81%
Head & Neck	66%	60%	88%	86%	35%	24%	78%	79%
Sarcoma								
Skin								
Upper Gastro	55%	60%	87%	87%	23%	27%	70%	76%
Urological	54%	64%	88%	87%	15%	20%	78%	82%
Other Cancers								
All cancers	62%	62%	88%	89%	23%	24%	78%	80%

Cancer type	Q70. Patient's rating of care 'excellent'/'very good'	
	This Trust	National
Breast	87%	90%
Colorectal / Lower Gastro	89%	87%
Lung	90%	88%
Prostate	82%	87%
Brain / CNS		
Gynaecological	91%	87%
Haematological	85%	90%
Head & Neck	96%	87%
Sarcoma		
Skin		
Upper Gastro	80%	85%
Urological	81%	85%
Other Cancers		
All cancers	87%	88%



The National Cancer Patient Experience Survey was undertaken by Quality Health, which specialises in measuring patients' experiences of hospital, primary care and mental health services, using this information to improve the quality of health care and the responsiveness of health services to patients and service users' needs.

Quality Health works with all acute hospitals in England, all independent providers of hospital care, and all Health Boards in Scotland using rigorous survey methods to evaluate the quality of services to patients, the outcomes of operative procedures and health gain, and establish the views of NHS staff. Quality Health also works for healthcare system providers in Wales and Northern Ireland.

Quality Health is an approved contractor for the Care Quality Commission survey programmes of patients and staff in the NHS and also undertakes data collection and survey systems for the National Patient Reported Outcomes programme on behalf of the Department of Health. Quality Health has headquarters in North Derbyshire.

Further information on the National Cancer Patient Experience Survey programme and the 2011-12 survey can be obtained at www.quality-health.co.uk

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Published August 2012
www.quality-health.co.uk
E-mail info@quality-health.co.uk

RWHT 2011-2012 National Cancer Patient Experience Survey
High level action plan

Progress update 11/01/13

<u>Action to be undertaken</u>	<u>Lead Person</u>	<u>Target date</u>	<u>Current status</u>
To ensure that all core members of each MDT have undertaken the Advanced Communications Skills training	LCC & MDT Leads		
To ensure that all B7/Lead CNSs have completed the Level 2 Psychology assessment training & receive monthly updates and support sessions	LCN		
1. To implement the National Holistic Needs Assessment tool & recommendations 2. To ensure that the HNA (including distress thermometer assessment) is undertaken at diagnosis, pre treatment, discharge and follow up	LCN		
To implement the NHS Choices National Cancer Information prescriptions programme (individualised information tailored to the each patient's need and delivered electronically)	LCN		
Trust sign up & commitment to work with Macmillan to implement the Macmillan Values based standards	LCN		
To ensure that all patients are offered the opportunity to receive tailored information via an "information prescription"	LCN	05/13	Trust programme to improve cancer patient information to commence Jan 2013. Macmillan Information Centre Assistant appointed Dec 2012.

To develop increased accessibility to information and support for patients by developing satellite Macmillan information and support units in the patient waiting areas of OPD 1, Deanesly Outpatients and Radiotherapy	LCN	03/12	Scoping exercise to be undertaken Jan 2013.
To develop regimen specific consent forms for chemotherapy and radiotherapy	LCN	04/12	
To ensure that all letters inviting patients to an OPD appointment state that they may bring a relative/friend with them. (Particular emphasis to be given on appointment letters re new patient consultations)	LCN	12/12	
1. To ensure that a CNS/Support Nurse is present at every new patient consultation where a diagnosis and treatment plan is to be discussed, and that there is provision for the CNS to provide 1:1 support to the patient following the OPD clinic visit with the Consultant (to include access to support in Diagnostics eg Beynon Centre) 2. To develop a CNS team cross cover system to ensure the delivery of the above.	LCN & Head of Nursing (Div 1) re CNS workforce review	04/12	Links in with the Trust's CNS workforce review – the outcome of this is pending. Cover for Gynae CNS & greater team working of Gyane CNS workforce has been resolved. 4 th Breast CNS appointed 11/12.
1. To ensure that each patient is offered a written record (before they leave hospital) re what has been said at their initial consultation eg diagnosis, treatment options & treatment plan. To utilise the IPP tool to assist with this (& to standardise practice in each MDT)	Lead CNSs & LCN	04/13	Trust programme to improve cancer patient information to commence Jan 2013. MISC Assistant appointed Dec 2012.

2. To offer a copy of the GP letter to all patients			
1. To ensure that all new patients are provided with the contact details for the CNS Team (credit card sized business cards for convenience) 2. To ensure that the CNS voicemail system is checked at least twice a day, and that calls are returned promptly	Lead CNSs	Ongoing	
CNSs to contact patient 24 hours post their initial consultation where diagnosis & treatment were discussed – to re-iterate what was discussed, to ensure that the patient understood the explanations, to re-iterate the treatment plan & to answer any questions.	Lead CNSs	04/13	Commenced with some MDTs, but links in with the Trust's CNS workforce review
To develop an electronic patient flagging system for each MDT – from diagnosis & up to 6 mths post treatment. This will enable prompt CNS review of the patient & expedite specialist team review of the patient	LCN	03/13	IT Infrastructure in place but not activated as yet. Links in with CNS workforce review
CNSs to undertake daily ward rounds to ensure patient comfort and to answer any questions. If any deviation from treatment plan, to provide full explanations as to the rationale for this	Lead CNSs & LCN	12/12	Most MDTs compliant with this. Links in with the Trust's CNS workforce review
1. Inpatient nursing admission documentation to prompt ward nurses to contact the patients CNS on admission - for notification purposes & to enable prompt CNS review (ie pre	LCN	03/13	

op review to re-iterate consent issues & details re the planned treatment) 2. In-patient nursing discharge check list to prompt the ward nurses to inform the CNS of the patients discharge in order that proactive telephone follow up can be instigated.			
Patient welcome pack to ward to include details re how to arrange for their families to meet with the specialist medical team.	LCN	03/13	Links in with Trust programme to improve cancer patient information to commence Jan 2013.
CNSs to proactively contact each patient 24 hrs post discharge from hospital (following admission for any reason)	Lead CNSs	12/12	Most MDTs compliant with this, but not all. Links in with CNS workforce review
CNSs to continue to undertake teaching sessions in the in-patient wards – with particular focus on communication issues	Lead CNSs	Ongoing	
GP & all primary care teams to be kept fully informed of the patients treatment and progress – Electronic discharge; GP faxes within 24 hrs of diagnosis; Somerset access to Hospice staff	LCN	Ongoing	
Primary care teams (especially GPs) to be informed of the NCPES results and to work with the cancer teams to address	Commissioners	03/12	Commissioners informed re NCPES results

