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Gateway Number: 16833

5th December 2011

Dear Colleague,

Draft Specialist Palliative Care Measures for the Manual for Cancer Services

I am writing to let you know that a draft version of the Specialist Palliative Care Measures are being issued today for a three-month consultation (Start Date 5th December 2011 Close Date: 27th February 2012). A copy of the draft measures can be found in the Cancer Section on the Department of Health web-site www.dh.gov.uk or the CQuINS web-site www.cquins.nhs.uk.

It is the intention to add the Specialist Palliative Care Measures to the Manual for Cancer Services.

The Purpose of the Manual for Cancer Services

The Manual for Cancer Services is an integral part of Improving Outcomes: A Strategy for Cancer and aligns with the aims of the Coalition Government: to deliver health outcomes that are among the best in the world. The Manual supports the National Cancer Peer Review quality assurance programme for cancer services and enables quality improvement both in terms of clinical and patient outcomes.

Substantial progress has been made in cancer in the last decade, particularly since the publication of the NHS Cancer Plan in 2000. However, major challenges remain and in January 2011 Improving Outcomes: A Strategy for Cancer was published. The strategy sets out how the future direction for cancer will be aligned with Equity and Excellence: Liberating the NHS in addition to meeting its stated aim to saving an additional 5,000 lives every year by 2014/15, aiming to narrow the inequalities gap at the same time.

The strategy acknowledges the importance of comprehensive information about cancer services for individual members of the public, cancer patients and their carers, healthcare professionals and commissioners.

Adherence to the measures in the manual for cancer services is not mandatory for the NHS but it is used by the National Cancer Peer Review Programme as part of the assessment of cancer services and to provide a ready specification for commissioning of cancer services within a given locality. It identifies the characteristics of service that are likely to have a significant impact on health outcomes. It is intended that those characteristics should help those involved in planning, commissioning, organising and providing cancer services to identify gaps in provision and to support the quality assurance of services enabling quality improvements.

The National Cancer Peer Review Programme, which is led by the National Cancer Action Team and includes expert clinical and user representation, provides important information about the quality of cancer services across the country and supports the development of leadership, self regulation and governance.



The peer review programme is changing its emphasis to focus on both clinical and patient outcomes. In order to achieve this, 'Clinical Lines of Enquiry' have been introduced and it is intended these outcome indicators will form part of the measures along with a reduced number of structure and process measures.

The development of cancer measures is an ongoing process in order to:

- reflect new NICE Quality standards and clinical guidelines and revisions to existing NICE guidance;
- allow greater influence by users of cancer services and their carers;
- allow greater influence by clinicians
- take account of possible modifications to measures following peer review visits;
- ensure the scope of measures encompasses the broader implementation of the Improving Outcomes: A strategy for Cancer.
- reflect new initiatives such as lapco, information prescriptions

The Draft Specialist Palliative Care Measures

The draft Specialist Palliative Care measures reflect the recommendations of the NICE Improving Supportive and Palliative Care for Adults with Cancer. It is acknowledged that there will be variation in the pace of implementation of the recommendations given current financial constraints and that any reconfiguration will need to take account of the government's vision for locally led NHS service changes. See link below for further information:

http://www.dh.gov.uk/en/MediaCentre/Pressreleases/DH_116290

The Consultation Process

It is hoped that you will contribute to this consultation exercise to ensure that the published Specialist Palliative Care Measures are both comprehensive and clear.

The purpose of this consultation is not to reopen the extensive consultation on the guidance, but rather to invite your comments on the contents of the draft measures, for example:

- Is the wording of each quality measure sufficiently clear? Are there instances where there is some ambiguity as to what is required?
- What additional, if any, supplementary guidance on the quality measures is required?
- Are there any important gaps?

To achieve the target of publishing the Specialist Palliative Care measures by early 2012 the programme for considering responses and making appropriate amendments has a very short timescale. The receipt of any responses in advance of the three-month deadline would therefore be much appreciated. For the same reason it will not be possible to consider any comments that are received after the deadline, 27th February 2012.

A proforma has been provided to assist you in compiling your comments on the contents of the draft measures and this can also be found on the Department of Health web-site or CQuINS web-site.

Any comments on either of the drafts should be submitted by 27th February 2012 to:

Zara Gross
Project Assistant, National Cancer Peer Review
National Cancer Action Team



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The consultation will follow the Cabinet Office Code of Practice on Consultation

<http://www.berr.gov.uk/policies/better-regulation/consultation-guidance>

For DH consultations, comments or complaints (but not responses to the consultation itself) should be directed to:

Consultations Coordinator
Room 3E48, Quarry House
Quarry Hill
Leeds
LS2 7UE
email: consultations.co-ordinator@dh.gsi.gov.uk

Information provided in response to this consultation, including personal information, may be published or disclosed in accordance with the access to information regimes (these are primarily the Freedom of Information Act 2000 (FOIA), the Data Protection Act 1998 (DPA) and the Environmental Information Regulations 2004).

If you want the information that you provide to be treated as confidential, please be aware that, under the FOIA, there is a statutory Code of Practice with which public authorities must comply and which deals, amongst other things, with obligations of confidence. In view of this it would be helpful if you could explain to us why you regard the information you have provided as confidential. If we receive a request for disclosure of the information we will take full account of your explanation, but we cannot give an assurance that confidentiality can be maintained in all circumstances. An automatic confidentiality disclaimer generated by your IT system will not, of itself, be regarded as binding on the Department.

The Department will process your personal data in accordance with the DPA and in most circumstances this will mean that your personal data will not be disclosed to third parties.

We look forward to receiving your comments.

Yours sincerely,



Stephen Parsons
Director
National Cancer Action Team

