



Report Cover Sheet

Report to:	CCC Trust Board	
Date of the Meeting:	27 November 2019	
Agenda Item:	P1/209/19	
Title:	Transforming Cancer Care – programme summary report	
Report prepared by:	Fiona Jones – Managing Director, PropCare Tom Pharaoh – Associate Director of Strategy	
Executive Lead:	Liz Bishop – Chief Executive Officer	
Status of the Report:	Public	Private

Paper previously considered by:	Not applicable
Date & Decision:	-

Purpose of the Paper/Key Points for Discussion:	This paper provides a summary report on the progress of the Transforming Cancer Care programme. The paper includes the top five key messages from the work to get ready to open CCC Liverpool, an executive summary of progress across the programme and a high-level milestone plan through to the opening of CCC-Liverpool in Spring 2020.
---	--

Action Required:	Discuss	✓
	Approve	
	For Information/Noting	✓

Next steps required	
---------------------	--

The paper links to the following strategic priorities (please tick)

Deliver outstanding care locally	✓	Collaborative system leadership to deliver better patient care	
Retain and develop outstanding staff	✓	Be enterprising	
Invest in research & innovation to deliver excellent patient care in the future		Maintain excellent quality, operational and financial performance	✓

The paper relates to the following Board Assurance Framework (BAF) Risks

BAF Risk	Please Tick
1. If we do not optimise quality outcomes we will not be able to provide outstanding care	
2. If we do not prioritise the costs of the delivering the Transforming Cancer Care Programme we will not be able to maintain our long-term financial strength and make appropriate strategic investments.	✓
3. If we do not have the right infrastructure (estate, communication & engagement, information and technology) we will be unable to deliver care close to home.	✓
4. If we do not have the right innovative workforce solutions including education and development, we will not have the right skills, in the right place, at the right time to deliver the outstanding care.	✓
5. If we do not have an organisational culture that promotes positive staff engagement and excellent health and well-being we will not be able to retain and attract the right workforce.	✓
6. If we fail to implement and optimise digital technology we will not deliver optimal patient outcomes and operational effectiveness.	✓
7. If we fail to position the organisation as a credible research partner we will limit patient access to clinical trials and affect our reputation as a specialist centre delivering excellent patient care in the future.	
8. If we do not retain system-side leadership, for example, SRO for Cancer Alliance and influence the National Cancer Policy, we will not have the right influence on the strategic direction to deliver outstanding cancer services for the population of Cheshire & Merseyside.	
9. If we do not support and invest in entrepreneurial ideas and adapt to changes in national priorities and market conditions we will stifle innovative cancer services for the future.	
10. If we do not continually support, lead and prioritise improved quality, operational and financial performance, we will not provide safe, efficient and effective cancer services.	✓

Equality & Diversity Impact Assessment		
Are there concerns that the policy/service could have an adverse impact on:	YES	NO
Age		✓
Disability		✓
Gender		✓
Race		✓
Sexual Orientation		✓
Gender Reassignment		✓
Religion/Belief		✓
Pregnancy and Maternity		✓

If YES to one or more of the above please add further detail and identify if a full impact assessment is required.

Transforming Cancer Care Programme Summary Report



November 2019

Key messages – November 2019

- 1** The report of the Northern England Clinical Senate outlining its recommendations on the timing of the transfer of the haemato-oncology service will be presented to the Boards of CCC and LUHFT in November.
- 2** The TCC Programme Board has agreed to revise the high-level move plan because of a key clinical dependency – CCCL will now open over the course of one weekend rather than two.
- 3** Intensive work has continued this month to ensure that there is a clear picture of the capacity that will be open in CCCL from day one and an affordable workforce in place to deliver it.
- 4** The support available to CCCL staff in the event of medical emergencies and cardiac arrest has now been agreed with colleagues from the Royal Liverpool Hospital.
- 5** Good progress has been made on operational handbooks, which describe how each department in CCCL will work, and service specifications, which set out the full range of services that we need from the Royal Liverpool

Build

- The building is due to be handed over in February 2020
- A 12-week commissioning period will follow handover
- The TCC Programme Board has agreed to revise the high-level move plan because of key clinical dependencies
- CCCL will now open over the course of one weekend, rather than two

Haemato-oncology inpatient move

- The report of the Northern England Clinical Senate outlining its recommendations on the timing of the transfer of the H-O service will be presented to the Boards of CCC and LUHFT in November

Service readiness

- The focus of service readiness work with operational and clinical teams continues to be the development of documents outlining how all parts of CCCL will operate from day one
- The first of these operational handbooks, in an agreed trust template, were presented to the TCC programme board in October with those remaining following this
- The next step is test and challenge each department's plans for how it will work in the new hospital to ensure that they are consistent with other areas of CCCL

Unscheduled Care

- This project deals with how CCCL will work with the Royal Liverpool Hospital (now part of Liverpool University Hospitals) to ensure that the needs of patients requiring unplanned and urgent care are met
- Work is progressing well with colleagues at the Royal to define how we will work together in the care of deteriorating patients in CCC Liverpool
- The support available to CCCL staff in the event of medical emergencies and cardiac arrest has now been agreed – this can now be reflected in the SLA and the trust policy for deteriorating patients

- The focus now is to agree the critical care support that CCCL staff and patients will receive from colleagues at the Royal and how the patients that need a higher level of care will be transferred across

SLA development

- A single contract will be drawn up with LUHFT with multiple specifications that outline the services the CCCL will need from them
- Our solicitors have shared the draft front-end to the SLA with LUHFT
- Work continues on the service specifications that will underpin the SLA
- The first of these specifications have been agreed by the TCC Programme Board, with others following in November and December
- A process to allow LUHFT to recruit to the additional posts necessary to meet key service specifications in advance of the formal signing of the SLA will be developed this month

Workforce

- All staff moving to Liverpool are being invited to complete a 'My Personal Move Plan' to explore the impact that the opening of CCCL will have on them
- Intensive work has continued this month to ensure that there is a clear picture of the capacity that will be open in CCCL from day one and an affordable workforce in place to deliver it

Communications

- The trust has launched the 'We'll Be Here' campaign to communicate the fact that CCCL is an additional site and that care will continue to be provided on the Aintree and Wirral sites.
- Part of the planned external marketing campaign has been delayed slightly due to the purdah period leading up to the upcoming General Election

