

## East London Health and Care Partnership (ELHCP) Cancer Board/City and Hackney ACS City and Hackney Cancer collaborative TERMS OF REFERENCE

### Context

The NHS planning guidance for 2016/17 to 2020/21 set the expectation that health systems produce a five year, place-based Sustainability and Transformation Plan (STP) to drive the implementation of the Five Year Forward View.

One of the strands of the STP is Cancer. An STP-wide Cancer Board, called the East London Health and Care Partnership Cancer Board, has been established and a Delivery Plan has been submitted to NHS England. The plan identifies the key issues and work streams:

- Sustainable delivery of constitutional standards
- Prevention
- Earlier Diagnosis
- Improving Cancer Treatment
- Living with and beyond cancer/cancer as a long term condition
- Joint STP/UCLH Cancer Vanguard projects

The Cancer Board will align its plans with the National Cancer Task Force Strategy and the Model of Care for Cancer London 2010. They will set the ambitions across the STP and these will be delivered by the three 'delivery systems' across north-east London, namely:

- The City and Hackney Accountable Care system
- The Barking, Havering and Redbridge Cancer Collaborative
- The Inner East London Cancer Collaborative

These terms of reference relate to the City and Hackney cancer collaborative which is also part of the planned care work stream within the C&H ACS

Across North East London (NEL), a number of transformation programmes and structures exist that pre-dated STPs and for C&H there is the C&H cancer board. This group will replace that.

### Purpose

The C&H Cancer Collaborative will coordinate local resources and efforts across partner organisations to

- achieve earlier diagnosis of stage I and II cancers
- improve one-year survival rates
- achieve equitable access to high quality treatment and care during and after treatment
- improve patient experience
- reduce the incidence of cancer in the population through effective prevention linking with local and ELHCP prevention programmes
- fully implement all elements of the Recovery Package
- develop and implement stratified follow-up pathways for people with breast, prostate and colorectal cancer

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## Scope

- The C&H Cancer Collaborative will make and implement plans to deliver the ambition set by the STP-wide Cancer Board, with specific reference to improvements required across City and Hackney to meet this ambition for the local population and in line with the requirements of the ACS transformation board.
- The Collaborative will draw upon the resources of partner organisations within ELHCP, the UCLH Cancer Collaborative, pan-London Transforming Cancer Services Team and link with cancer charities and existing local programmes to establish a number of theme specific work programmes, some of which may be time limited.
- The work programmes will also be informed by data and outputs from a range of national and local sources including national audits, Quality Surveillance, National Cancer Patient Experience Survey, patient focus groups, GP referral rates and other sources of information
- The Collaborative will report progress on a regular basis to the STP-level Cancer Board and the C&H ACS transformation board and highlight any issues that require NEL level support to unblock.

### Issues that are out of scope include:

Contractual and performance management issues - oversight of Cancer Waiting Times at an NEL level will be the remit of the separate NEL-wide 62 day System Leadership Forum (SLF).

See overarching ELHCP cancer governance in Appendix 2.

## Roles and responsibilities of the C&H Cancer Collaborative(C&HCC)

The C&HCC will form part of the sub-structure of the planned care work stream within the C&H ACS. In addition member organisations of the ELHCP have committed to fully support and engage with STP programmes through the STP level Memorandum of Understanding. They are therefore jointly responsible and accountable for implementing the STP Cancer Plan at a local level.

The C&HCC will therefore have the responsibility to produce a single work programme for cancer to align with the priorities of the ACS and the ELHCP.

## Membership

The following are core members of the IEL Cancer Collaborative

- ELHCP Cancer Lead
- A senior clinician from HUH
- A senior level manager from HUH
- A senior level manager from
  - City and Hackney CCG

Planned care work stream representative

- A Director of Public Health
- A primary care cancer lead or Macmillan GP

Members need to be in a senior position within their organisation with delegated authority to act on their organisation's behalf.

## Partnership

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For our local cancer programme to be effective, wider partnerships will be built on through the sub-group structure. These stakeholders include:

- UCLH Cancer Collaborative/London Cancer
- Bart's Health
  
- Macmillan
- CRUK
- Transforming Cancer Services Team for London
- NEL Commissioning Support Unit – Cancer Commissioning Manager
- Health Watch/Patient groups

### **Meeting arrangements**

The C&H cancer Collaborative shall meet every xx months in advance of the ELHCP Cancer Board and planned care board. The frequency of meetings of the theme specific work programmes will be defined by the group lead/chair

**Chair:** TBC (drawn from one of the ELHCP organisations (and to act as SRO for the local C&H system with responsibility to report back to ELHCP Cancer and planned care boards).

Agendas and papers will be produced by xxx and be available to each member of the Collaborative in advance and preferably at least 5 working days prior to the meeting.

Minutes taken of meetings to include agreements and actions, and a record kept of those present.

Minutes of meetings shall be made available electronically to all members within 5 working days and will also be presented and agreed at the next meeting.

### **Theme Specific Work Programmes/Task and Finish groups:**

Projects and pieces of work will be allocated to sub-groups and task-and-finish groups attended by subject matter experts. These groups will report to the C&H CC to enable it to report progress on delivery to the ELHCP Cancer Board and ACS planned care work stream.

Each group will be led by a core member of the collaborative with the responsibility to report back to the IEL CC chair.

### **Quorum**

The quorum necessary for the transaction of business shall be 50% of the core membership plus the chair (or named deputy chair in their absence)

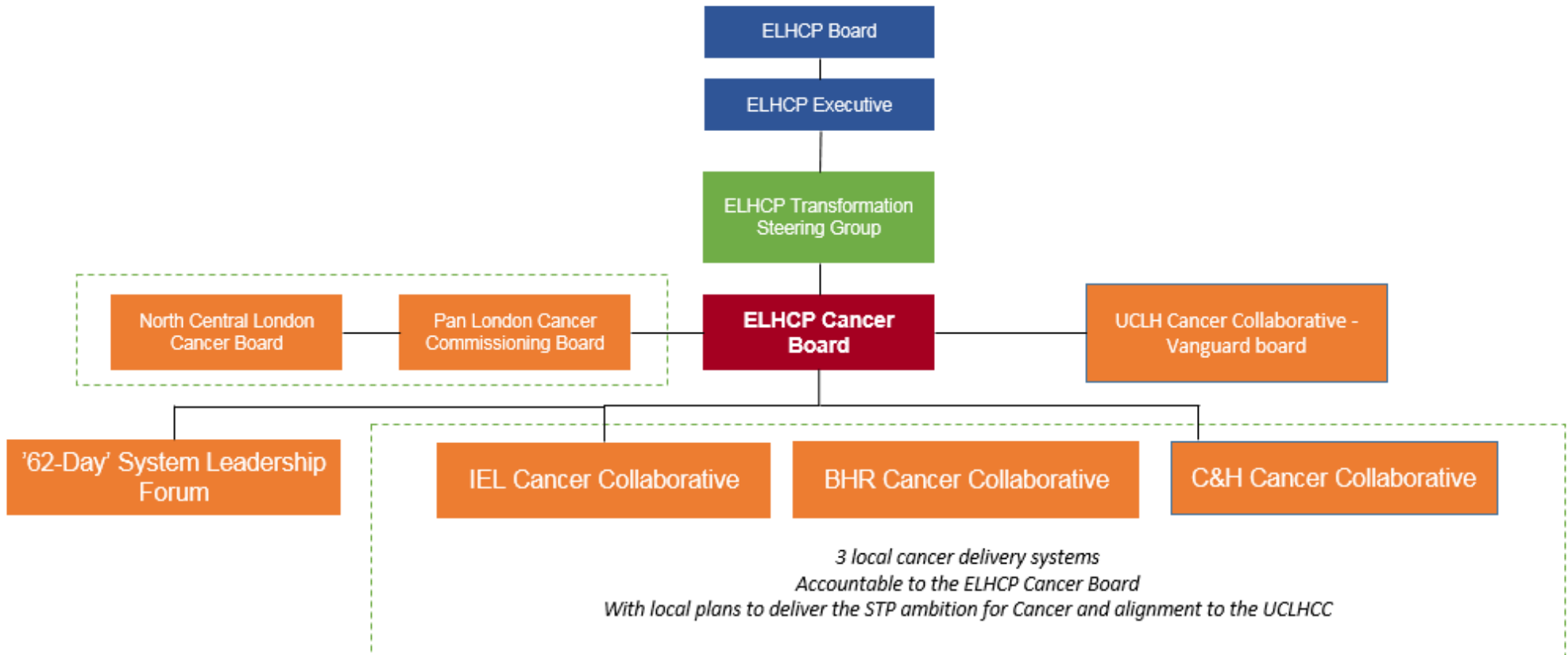
### **Review**

The effectiveness of the collaborative, structure/sub-structures and these Terms of Reference will be reviewed on a six monthly basis

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## Appendix 1: ELHCP Cancer Governance Structure



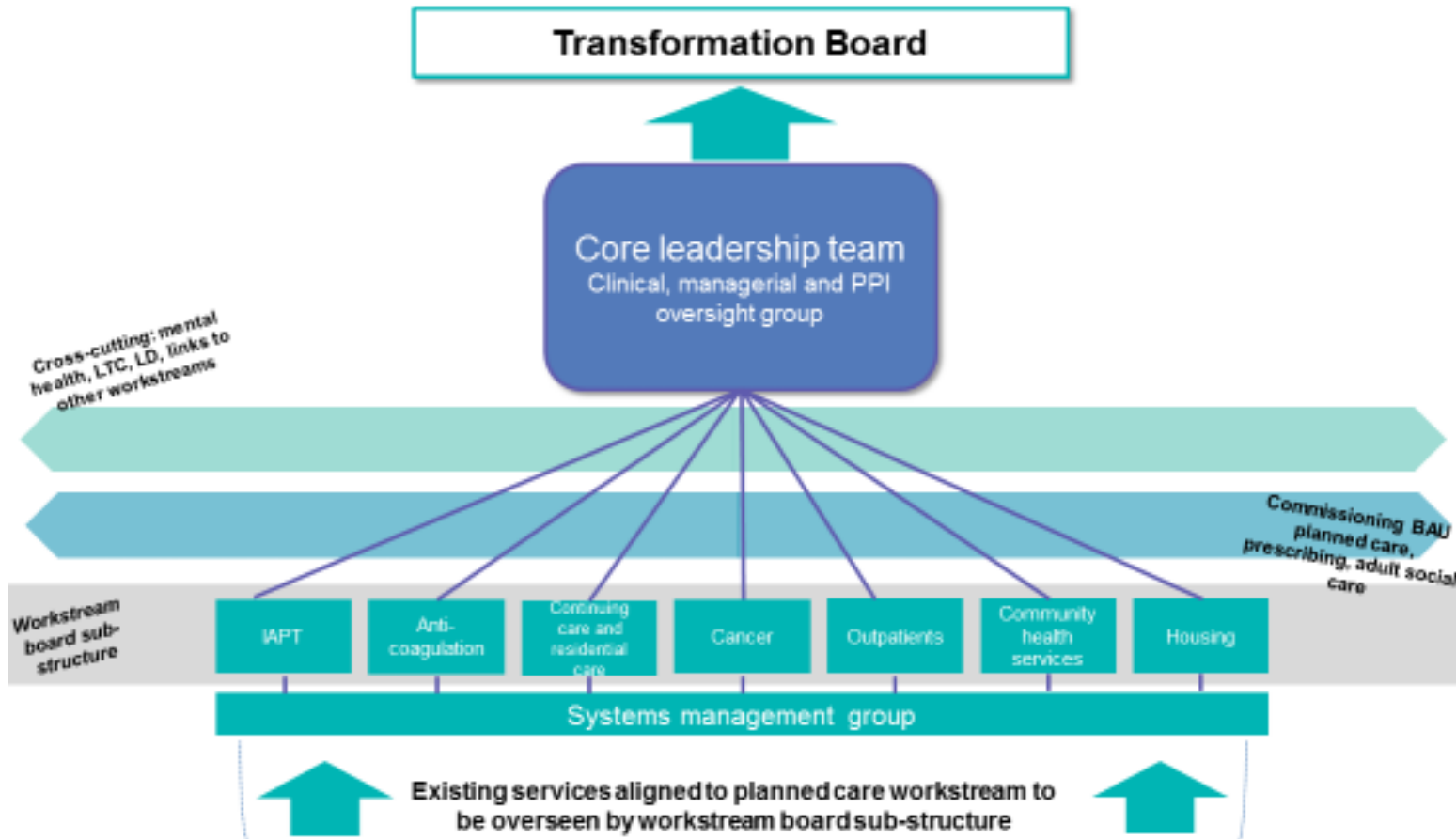
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Appendix 2: City and Hackney Accountable care system- Planned Care Work stream outline governance

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## Planned care workstream proposed outline governance



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