



## Improving ovarian cancer diagnostic pathways

### Expression of Interest

Please email this application to Jane Winter, Lead Nurse, Wessex Cancer Alliance (jane.winter1@nhs.net) by 5pm on Friday 29<sup>th</sup> January 2021. Please ensure individuals named in this form are aware that the Project Team may contact them to discuss this application.

<b>KEY CONTACTS:</b>	
<b>1. Application key contact:</b>	<i>Name/Role/ Organisation /Phone/Email</i>
<b>2. Proposed Senior Responsible Officer (SRO)</b>	<i>Name/Role /Organisation /Phone/Email</i>
<b>3. Proposed participating lead Trust</b>	<i>Trust name:</i>
	<i>Key Contact: Name/Role/Organisation/Phone/Email</i>
<b>Proposed participating supporting Trust</b>	<i>Trust name:</i>
	<i>Key Contact: Name/Role/Organisation/Phone/Email</i>
<b>SCOPE OF PROJECT:</b>	
<p>This project aims to:</p> <ul style="list-style-type: none"> <li>(i) provide a streamlined diagnostic pathway for people with symptoms suggestive of ovarian cancer</li> <li>(ii) provide a development pathway for senior clinical nurse specialists wishing to evolve clinical practice</li> </ul> <p><u>Objectives:</u></p> <ul style="list-style-type: none"> <li>•Streamline the referral pathway to minimise waste, improve experience and reduce time to diagnosis</li> <li>•Provide education to raise awareness of ovarian cancer signs and symptoms to promote earlier action (within primary care and the community at large)</li> <li>•Work across boundaries, ensuring that pathways are developed around patients, not organisations and particularly ensuring that the new primary care networks are involved in</li> </ul>	



the design and delivery of the project and that all roles are used effectively to deliver patient centred support

- Developing a business case for the service delivery model, to ensure the sustainability and dissemination of the project

#### INDIVIDUAL REQUIRED:

Please confirm that you can release, **subject to funding**, a Clinical Nurse Specialist at Agenda for Change 8a with experience of supporting people with Ovarian Cancer and quality improvement experience for 18 months from February 2021 to July 2022.

Responsibilities will include but not be limited to:

1. Engage stakeholders (including but not limited to patients, healthcare professionals and health and social care managers) to agree a theory of change/logic model to understand the delivery of care across cancer pathways, using ovarian cancer as an exemplar to achieve
  - (i) care most valued by patients
  - (ii) care that provides the best clinical outcome
  - (iii) the most cost-effective care
2. Undertake process mapping of ovarian cancer pathways from referral to point of diagnosis across primary/secondary care in two geographical locations
3. Combine patient experience with staff experience to identify all the steps (both unhelpful and helpful) in cancer diagnostic pathways, using ovarian cancer as an exemplar, particularly focusing on eliminating waste (defects, overproduction, transportation, waiting, inventory, motion, overprocessing, human potential)
4. Once areas of waste identified, create remodeling of steps within the diagnostic pathway and triage/screening processes so that “every step in the patient journey [pulls] people, skills, materials and information towards it, one at a time, when needed”
5. Defining the existing workforce in relation to the patient pathway
6. Defining the required CNS workforce in relation to the patient pathway (bearing in mind likely availability of workforce, e.g. ageing workforce)
7. Use the Macmillan Competency Frameworks for nurses and AHPs as guide to identify existing and required competencies for the workforce in relation to the patient pathway
8. Use plan-do-study-act cycles to test out changes in steps in the pathway before attempting full scale implementation
9. Develop an education strategy and programme for primary care to enhance knowledge of ovarian cancer signs and symptoms and to promote referral pathway changes.
10. Engage with local and national partners to develop a communication strategy and resources to raise awareness of signs of symptoms of Ovarian Cancer that can be used to support early intervention with primary care.



11. Develop an implementation toolkit so that learning from changes made can be adopted and adapted rapidly across other cancer pathways both locally and nationally.



#### **REPORTING REQUIREMENTS:**

- To work with the Wessex Cancer Alliance programme team to scope fully the project and produce a project plan for full project submission to HEE SE by 1<sup>st</sup> March 2021
- Supported by the Wessex Cancer Alliance programme team to report to HEE SE on a minimum of quarterly basis detailing progress, issues, any variations in infrastructure, expenditure, and project's anticipated benefits/impacts as detailed within the PPD(s) and any forecasted delivery risks. Quarterly reporting dates in 2021 are
  - 19 March 2021
  - 18 June 2021
  - 17 September 2021
  - 17 December 2021
- To produce a written evaluation of the project for Wessex Cancer Alliance and HEE SE at project close
- To submit an article to a peer reviewed journal describing the project and associated evaluation at project close
- To present at a conference describing the project and associated evaluation during the project lifespan or at project close

#### **FURTHER INFORMATION:**

**6. Please outline the steps that have been taken to gain key stakeholder support for this project (max 300 words):**

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**7. Why do you think your trust should be selected as a lead site? (max 300 words):**

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**8. Please provide a description of the proposed test site locality e.g. urban/rural, affluence and deprivation, ethnicity (max 100 words).**

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**SUPPORTING SIGNATORIES:**

<p><b>Senior Responsible Officer</b></p>	<p><i>Name:</i> <i>Role:</i> <i>Organisation:</i></p> <p><i>Signature:</i></p> <p><i>Date:</i></p>
<p><b>Lead Cancer Nurse</b></p>	<p><i>Name:</i> <i>Role:</i> <i>Organisation:</i></p> <p><i>Signature:</i></p> <p><i>Date:</i></p>