

CLINICAL PRIORITIES ADVISORY GROUP
05 March 2019

Agenda Item No	02.1
National Programme	Cancer
Clinical Reference Group	Specialised Cancer Surgery
URN	1642

Title (Insert Service Specification title in full)

Sarcoma (all ages)

Actions Requested

1. Agree the Service Specification Proposition
2. Recommend its approval as an IYSD

Proposition

The Sarcoma Service Specification is an amalgamation and revision of two separate existing specifications (bone sarcoma and soft-tissue sarcoma). Its purpose is to better reflect existing clinical pathways and improve compliance with existing clinical service standards.

The revisions aim to address two key clinical issues: (i) under-developed sarcoma networks that vary in function; and (ii) lower than expected rates of referral into the specialist sarcoma cancer MDT for case review and treatment planning. By clarifying existing clinical pathways it is expected that more patients will benefit from specialist clinical expertise which may improve the treatments offered to people with sarcoma.

The main revisions are:

- Description of the role of sarcoma networks now reflects Improving Outcomes Guidance for Sarcoma, published by the National Institute of Health and Care Excellence (NICE) and Cancer Peer Review Measures;
- Requirement that sarcoma networks develop network-wide treatment protocols and pathways;
- Requirement that all sarcoma cases are referred to the specialist sarcoma MDT;
- Clarification of the working relationship between sarcoma networks and children's and teenage and young adult networks; and

- Introduce a new set of clinically relevant quality indicators to better measure service performance.

These changes are not expected to impact on the number of providers delivering specialist sarcoma care.

It is important to note that the revised service specification maintains the minimum MDT volumes as per Improving Outcome Guidance for Sarcoma (NICE). Although these are not new standards, providers will be requested to self-declare against these standards as part of implementation of the revised Service Specification.

Clinical Panel recommendation

Not applicable.

The committee is asked to receive the following assurance:

1.	The Head of Clinical Effectiveness confirms the proposal has completed the appropriate sequence of governance steps and includes where necessary an: Evidence Review; Clinical Panel Report.
2.	The Head of the Cancer Programme confirms the proposal is supported by an: Impact Assessment; Stakeholder Engagement Report; Consultation Report; Equality Impact and Assessment Report; Service Specification Proposition. The relevant National Programme of Care Board has approved these reports.
3.	The Director of Finance (Specialised Commissioning) confirms that the impact assessment has reasonably estimated a) the incremental cost and b) the budget impact of the proposal.
4.	The Operational Delivery Director (Specialised Commissioning) confirms that the service and operational impacts have been completed.
5.	The Director of Nursing (Specialised Commissioning) confirms that the proposed quality indicators have been adequately defined.

The following documents are included (others available on request):

1.	Service Specification Proposition
2.	Consultation Report
3.	Evidence Summary - not applicable

4.	Clinical Panel Report - not applicable
5.	Equality Impact and Assessment Report

No	Metric	Summary from evidence review
1.	Survival	Not measured.
2.	Progression free survival	Not measured.
3.	Mobility	Not measured.
4.	Self-care	Not measured.
5.	Usual activities	Not measured.
6.	Pain	Not measured.
7.	Anxiety / Depression	Not measured.
8.	Replacement of more toxic treatment	Not measured.
9.	Dependency on care giver / supporting independence	Not measured.
10.	Safety	Not measured.
11.	Delivery of intervention	Not measured.

Considerations from review by the Rare Disease Advisory Group

Not applicable.

Pharmaceutical considerations

Not applicable.

Considerations from review by National Programme of Care

POC Board support:

1) The proposal received the full support of the Cancer PoC Board on 11th February 2019.

Benefit of Service Specification:

The revised service specification aims to:

- Clarify service standards for specialist sarcoma centres, specialist sarcoma multi-disciplinary teams (MDTs) and sarcoma networks;

- Improve pathways of care and access to specialist sarcoma expertise through development of stronger sarcoma networks; and
- Better measure service performance through a new set of quality metrics.

Implementation timescale:

1) Non-material amendments and therefore suitable for immediate adoption.

Local commissioning teams, with the support of the Quality Surveillance Team, will be expected to work with providers to assess compliance against the revised service specification.