OPERATIONAL POLICY
for the day case and outpatient
Cancer Care and Haematology Unit,
Stoke Mandeville Hospital

Based on present services with future services in italics

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1. INTRODUCTION

This document outlines the environment and working practices for the Cancer Care and Haematology Unit (CCHU) within Buckinghamshire Healthcare NHS Trust (BHT) serving the population of Buckinghamshire. This policy will also include in italics proposed service developments that will be included in the second extension (2014).

The unit treats a range of patients from the age of 19 years upwards offering chemotherapy and supportive treatments to those patients who have a cancer diagnosis or require therapies for a range of haematological non-malignant conditions. The unit has outpatient facilities with allocated clinics for both haematology and oncology. From the main entrance patients are welcomed and booked in by reception staff who show the patient to the appropriate place within the unit. Patients within the outpatient clinics are reviewed by the consultant or their medical team and supported by specialist nurses. There is a separate entrance to the side of the building providing access to the dedicated day case treatment areas where the chemotherapy and supportive therapies are administered by appropriately trained nursing staff. Adjacent to the treatment area is the acute oncology assessment bay which will offer emergency assessment and treatment to cancer patients who become acutely unwell due to their disease or treatment. There is a facility for ambulance access for emergency care.

An average of 400-500 treatments are administered on site per month.

The purpose built facilities on site allow patients and their relatives to receive a holistic approach to treatment and supportive care.

The cancer services work in conjunction with the Thames Valley Strategic Clinical Network (TVSCN) and all treatments and procedures comply with Network approved protocols and guidelines. The Regional Cancer Centre for this Network is Oxford.

E-Prescribing is used within the TVSCN and is the prescribing system for chemotherapy treatments and provides detailed medical information and assessments for each patient’s chemotherapy treatment. This system reduces risks in the planning, treatment and care of patients attending the unit and improves links with the Regional Cancer Centre, in Oxford. There are a number of consultant oncologists who are based at the Regional Cancer Centre, in Oxford who attend outpatient clinics within BHT. There are also two Trust based Consultant Oncologists who also provide acute oncology medical cover for the Trust. With the development of the acute oncology assessment bay this will need to increase to three whole time equivalent. The six haematology consultants are based and work across BHT.
2. PHILOSOPHY OF SERVICE

2.1 Mission Statement

“Our aim is to combine clinical excellence with a high standard of care, using a holistic approach where the patient’s and relative’s emotional, physical, spiritual and psychological needs are met.”

2.2 Aims and Objectives

- To provide clinical areas in which the patients can receive the chemotherapy and supportive treatments in a comfortable and supportive environment.
- To provide acute oncology assessment and treatments for cancer patients who become acutely unwell due to their disease or treatment.
- For all patients, relatives, carers and health care professionals within BHT to have access to a resource information centre, complementary therapies and specialist advice.
- To provide outpatient facilities for planning, investigations and for the follow up of patients with both malignant and non-malignant diagnoses.

3. OUTPATIENT/DAYCASE FACILITIES

- There are currently seven outpatient clinic rooms with two waiting areas all based on the ground floor. The plan is to have 12 in the future.
- These facilities in the unit are for consultant and nurse-led outpatient clinics and to undertake procedures and investigations that may be required as part of an outpatient appointment.
- Within the daycase treatment there are 18 reclining chairs, arranged in bays of six for patients requiring planned treatment for a cancer or haematology diagnosis.
- The unit has a private room identified for patient isolation, the administration of treatments and confidential examination. Patients being followed up after autologous stem cell transplants can be seen in this room.
- The unit has a purpose built individual treatment room for the treatment of Teenage and Young Adults (TYA) aged 19-24.
- The unit has a designated intrathecal chemotherapy room.
- The unit will have a dedicated and integrated pharmacy area where the chemotherapy and supportive medicines can be made and dispensed.
- The unit will have an office area where the clinical cancer pharmacists will be accessible to staff and patients.
- The unit has facilities for provision of refreshments, complementary therapies, cancer information, wig fitting, psychology appointments and dietetic advice.
- The unit has two quiet rooms to provide a private area for counselling and support of patients and their carers, these are non clinical rooms.
• There is a landscape garden and courtyard areas for the benefit of patients.

4. OUTPATIENT/DAYCASE CRITERIA

• Referrals to the treatment areas are only accepted from the oncology and haematology teams within BHT.
• Patients receiving treatment within both day units should have a World Health Organisation (WHO) performance status 0-2. Performance status will be assessed with each episode of care. Treating patients with poorer performance status in the units will be exceptional and would require the patient’s consultant to discuss the treatment with the nurse in charge.
• Planned treatment time must not exceed 6 hours (8 hours with extended opening) on any one day.
• Patients should be mobile and self caring to receive treatment within the outpatient/day case unit. Mobile patients who require some assistance should be accompanied by their carer throughout their stay. No beds are available for patients within the treatment rooms. Treatments are administered in a reclining or upright chair.

Acute Oncology Assessment bay (future)

It is planned that this will be a dedicated area for the assessment and treatment of patients with acute/urgent symptoms as a consequence of their cancer or cancer treatment.

There will be an individual treatment room with ensuite facilities and a separate area with four reclining chairs for the provision of urgent (acute?) care. There will be a private office space where a telephone triage system will be manned for all cancer patients currently receiving treatment within BHT.

4.1 Opening Hours of the Cancer Care and Haematology Unit

Monday-Friday 08.45-17.00 (except bank holidays) (plan to review a proposal of extending the opening hours to long days to accommodate long day chemo regimes).

Chemotherapy which needs to be made on the day of administration will not be available for approximately one hour after receiving satisfactory blood results.

The unit is not open at weekends or Bank Holidays. Patients must refer to their out of hours telephone number at these times.

4.2 Referrals

Patient referrals for chemotherapy treatment are made by the relevant consultant oncologist/haematologist. Referrals for cancer treatments are generated electronically using the e-prescribing system which is used throughout the network. Referrals for transfusion support are made using
the day case referral form, by the relevant Oncology/Haematology medical team.
Referrals to haematology or oncology clinics are made through the consultants’ secretaries.

Nurse-led care is provided within each unit with a pre-treatment assessment, cannulation and the administration of chemotherapy/supportive therapies being organised by the nursing staff in conjunction with the TVCN protocols.

GP’s are informed of patient’s treatment and on completion with a treatment summary.

*Policy on Referrals to Acute Oncology Assessment Bay to be written.*

### 4.3 Signposting when patients contact the unit by phone for emergency care:

**4.3.1 Oncology patients - In hours** - Any patients contacting the service that requires emergency care will be advised to either attend the Cancer Care and Haematology Unit or to the nearest A&E department (Stoke Mandeville Hospital (SMH)/Wexham Park Hospital (WPH)). Patients requiring a medical review may be directed to their GP practice.

**4.3.2 Oncology patients - Out of hours** - Patients will continue to use the 24/7 contact number based at Oxford Churchill Cancer Centre however they will need to be advised there will no longer be emergency care services based at Wycombe Hospital.

**4.3.3 Haematology patients - In hours** - These patients will be seen within the Cancer Care and Haematology Unit. These patients will have access to a haematology consultant or registrar on the SMH site.

**4.3.4 Haematology patients - Out of hours** - Patients will continue to use the 24/7 Ward 5 contact number (01296 316336) for consultant advice.

*Once the acute oncology assessment bay is operational new contact details will be issued to patients.*

## 5. MEDICAL STAFFING

The CCHU treatment area is supported on alternate Tuesday mornings by an associate specialist.

**ONCOLOGY MEDICAL STAFF**

A team of 11 consultant oncologists and one associate specialist provides outpatient care for oncology patients. Nine of the consultants are based in Oxford, visiting Bucks for 1-2 days per week. Two Bucks-based consultants provide acute (emergency) inpatient oncology care as well as specialist clinics. Some registrars...
(doctors in higher specialist training) take part in the clinics, but the bulk of medical care is consultant delivered.

Oncology treatment within Bucks is offered for patients with cancers of the breast, upper and lower gastro-intestinal tract, lung, gynaecological and urological systems and unknown primary. Rarer tumours, such as sarcomas, are best managed in a larger centre, and the majority of such patients from Bucks are treated in Oxford. However, acute oncology support is given at Stoke Mandeville Hospital for any patient with cancer, regardless of type.

The links with Oxford include using shared treatment protocols, ensuring that up to date care is delivered when patients are treated locally. Research is integrated into clinical practice, primarily by contributing to national randomised trials.

All oncologists work within site-specific multi-disciplinary teams, a system that builds strong working relationships between all the health care professionals involved in diagnosing and treating cancer. This team working has allowed robust links to be established between oncology and most other departments in the Trust.

HAEMATOLOGY MEDICAL STAFF

There are six Consultants, all full time (10+Pas per week). There is also a full time Specialist ST3 Haematology post rotating from Oxford, a full time CT1 General Medicine rotational post and a full time F1 post for haematology inpatients, currently the ST3 works at WH three days per week and at SMH two days per week. There is support from a F2 General Medical trainee in two SMH haematology clinics per week. There is also a shared Haem/ Onc ST2 post at WGH (0.4 WTE Haem).

The Haematologists hold clinics on Monday, Wednesday and Friday morning for all patients other than emergencies. There is a separate anticoagulation clinic, mainly for difficult cases, on a Tuesday afternoon. Urgent patients are seen as needed.

6. NURSE STAFFING

The CCHU is managed by a Band 7 Clinical Nurse Specialist who has studied Cancer/Palliative care at degree level and holds the specialist chemotherapy qualification. The service is supported by the Lead Chemotherapy Nurse for BHT.

There is an allocated co-ordinator each day who will be in charge of the unit. This will be a chemotherapy trained nurse band 6 or above.

The nurses working within the CCHU are IV competent and any staff required to administer chemotherapy hold the specialist chemotherapy qualification. Nurses participate in an ongoing training programme which provides information on new treatments and regimes. Nursing staff also receive extensive training in the management of oncological/haematological emergencies. For example:

- Neutropenic sepsis
- Anaphylaxis
- Extravasation
• Spillage of cytotoxics
• Cardiac Arrest

Each member of staff undergoes annual competency assessments for chemotherapy and Central Venous Access device care.

The nursing teams work closely to support the service and staff participate in cross-site working.

Each site has a blood transfusion nurse assessor who is responsible for assessing competency for staff participating in the blood transfusion pathway.

Nursing staff undertaking an extended role will receive the appropriate training and competency assessment prior to independent practice.

Within the nursing team there are a team of four staff who are trained and competent in the insertion of PICC lines and two of these nurses are competent in the removal of central lines. The line team is managed by the CNS based at CCHU.

*Acute Oncology bay will be staffed by the acute oncology nursing team, however the establishment will need to be increased to cover this new service.*

7. CLINICAL TRIALS

A number of trials are offered to patients and carried out within each Unit. There is a dedicated research team on each site that works closely with the Oxford clinical trials department and with the Consultant responsible for the patient’s care. All staff on both sites co-operate with the research teams in delivering the treatments and following the trial protocol.

8. PHARMACY TEAM

The treatment of cancer patients is supported by a pharmacy team. The pharmacists are involved in multi-disciplinary teams to review, monitor and plan treatment. After the chemotherapy has been prescribed by one of the clinicians, it receives a validation check by a specialist cancer pharmacist. For chemotherapy given by injection the pharmacy team within the aseptic unit, then prepares the chemotherapy within a special environment to protect the product and staff. Once prepared a pharmacist then checks the final chemotherapy product to ensure it has complied with our quality standards.

For oral chemotherapy or supportive medicines given with the chemotherapy, these are dispensed by the pharmacy aseptic team. The chemotherapy is then sent to the day unit for administration by the cancer nurses.

*In the new plan, the proposal is to bring the cancer pharmacy within CCHU extension. This will mean that the clinical cancer pharmacists have a base within the unit and accessible to staff and patients. The unit extension plan also includes a new dedicated aseptic suite in which to prepare the chemotherapy for all cancer patients and their supportive treatments. This will ensure that once the treatment is ready it*
can be passed directly to the nursing staff for administration. The pharmacy team will then be optimal placed to be fully integrated within the multi-disciplinary team.

The preparation of chemotherapy within the aseptic unit is externally reviewed by an External Quality Assurance Pharmacist every 18 months under EL52(97).

Pharmacists are trained to degree level and then undergo further in-house training and have to demonstrate competency in order to be able validate chemotherapy prescriptions and / or final release chemotherapy products.

Pharmacy technicians are trained to NVQ3 level and the Pharmacy Senior Assistants are trained to NVQ2 level. Both technicians and senior assistants undergo in-house training and have to demonstrate competency to prepare products aseptically. Student pharmacy technicians as part of their two year training are trained under supervision to prepare chemotherapy and also undertake the same in-house training programme. Pharmacy Assistants working within the aseptic units to support the preparation of chemotherapy, but do not undertake the manipulation role.

The pharmacy aseptic units are each managed by Pharmacy Aseptic Unit Managers, who are technicians. The specialist cancer pharmacists are managed by Lead Cancer Pharmacist. The pharmacy cancer service is managed by the Assistant Director of Pharmacy for Patient Services.

9. CANCER EDUCATION, INFORMATION AND SUPPORT SERVICE

The delivery of effective high quality care, information and support that is up-to-date, accurate, relevant and appropriate throughout the cancer care pathway is a national and local priority. The Cancer Education, Information and Support Service (CEISS) is therefore important in meeting the growing needs for information and support.

For the period 1 April 2011 to 31 March 2012, 2,217 patients with a cancer diagnosis were recorded as having first treatments (Buckinghamshire Healthcare NHS Trust, 2012). This data includes patients diagnosed in Buckinghamshire Healthcare NHS Trust, and receiving their first treatment at SMH, WH or in a tertiary (ie Oxford) or primary care setting. It does not include patients with ongoing treatment and information needs. In addition there are a substantial number of people with suspected cancer symptoms, (although not subsequently diagnosed with cancer), who undergo investigations, and who also require information and support.

All these patients will have requirements for information and support throughout their pathway of care. It is envisaged that the projected growth in the local population will also result in an increase in the number of people with a cancer diagnosis and with suspected cancer symptoms. The continuing development of the CEISS is therefore important in meeting the growing need for information and support.

The CEISS is available for people in Buckinghamshire and the local areas. Including visitors to the Cancer Care and Haematology Unit (CCHU), SMH, the haematology in-patient ward, SMH, the Sunrise Unit (SU), WH and main OPD, WH. The integration of the CEISS to within the cancer service areas (CCHU & SU) enables
users (including patients, relatives, carers and friends) to have ready and easy access to the information and support services available. The CEISS also act as a resource for healthcare professionals and other staff working with cancer patients and their carers. The CEISS is staffed by Macmillan Education, Information and Support Facilitators who work across the Trust and are supported by trained volunteers.

The information and support services available include access to a wide variety of specialist cancer booklets, patient information prescriptions, guided internet access, a Macmillan CAB advisor, complementary therapies, wig supply and fitting and supply service, the Moving on with Confidence course (for people who have completed active treatment), relaxation sessions and creative arts sessions.

10. MULTI DISCIPLINARY TEAMS (MDTs)

The MDT office is used as a base for the MDT coordinators, who organise and facilitate the weekly video-conferenced MDT meetings, for every tumour site. Their close vicinity to the Cancer Clinical Nurse Specialists is advantageous, as close liaison about patients is vital to this role. MDT staff are also responsible for all cancer data entry into the Trust Cancer information system (Infoflex), which forms part of the national Open Exeter system.

11. TWO WEEK WAIT OFFICE

As part of the proposed extension to the CCHU, the Two Week Wait (Priority referrals) team will be relocated into the building.

The team of four staff process all the GP suspected cancer referrals (over 1,000 referrals per month) and organise patient appointments, across the Trust in all tumour sites. They liaise closely with the MDT staff who provide cover and liaise daily with the Cancer Clinical Nurse Specialists for patient advice.

12. CLINICAL NURSE SPECIALISTS (CNS)

The Clinical Nurse Specialist (who also acts as the patient’s key worker), works closely with hospital nurses, doctors and other healthcare professionals to maximise the independence, dignity and quality of life of people suffering from cancer. They also liaise closely with community carers and family doctors (GP) to ensure the highest quality of care at home.

The CNS’s are located within CCHU and offer the patients:

- A contact point for people at any stage of their cancer.
- Advice and support to patients, their relatives, carers and friends.
- Help with physical symptoms such as pain, fatigue or nausea.
- Advice about treatments such as radiotherapy, chemotherapy and surgery.
- Specialist information about the patient’s cancer.
- Advice on continuing care at home.
- Someone to talk to about worries or problems.
- Advice on relationships, fertility or sexual problems.
• Advice and help on how to manage financial problems, eg Macmillan grant.
• Refer to other healthcare and Macmillan professionals as necessary eg Dietitian, District Nurses, Citizens Advice Bureau Advisor.
• Acute oncology CNS visits patients who are admitted to SMH with symptoms as a consequence of their cancer/cancer treatment within 24 hours of admission (during normal working hours).

13. VIDEO CONFERENCE/MEETING ROOM

Video conferencing is available across site for meetings and for specialist MDT meetings to other hospitals.