

Cancer of Unknown Primary

Progress in the search for improved
Diagnosis, Management and Treatment

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Session 1

Managing the Patient Pathway

Managing the Patient Pathway

- Where are we now?
- Where do we need to get to next?
- How are we going to get there?

Managing the Patient Pathway

- Where are we now?
 - Latest developments in CUP Clinical Services
- Where do we need to get to next?
 - Outcome of CUP Measures process
- How are we going to get there?
 - Practical suggestions, identifying barriers

Where are we now?

Latest developments in CUP Clinical Services

- What did the CUP Guideline recommend?
- What is happening in practice, in 2012

Key Recommendations from the Guideline

- New definitions
- CUP Teams and MDTs at all hospitals
- CUP Specialist Nurses
- Rapid inpatient review of MUO patients
- Delivery of advice, symptom control, support
- Fast track referral of OP's to MUO clinics
- CUP Specialist MDTs
- CUP NSSG, CUP data collection
- Appropriate tests, treatment, research

Good progress since 2010

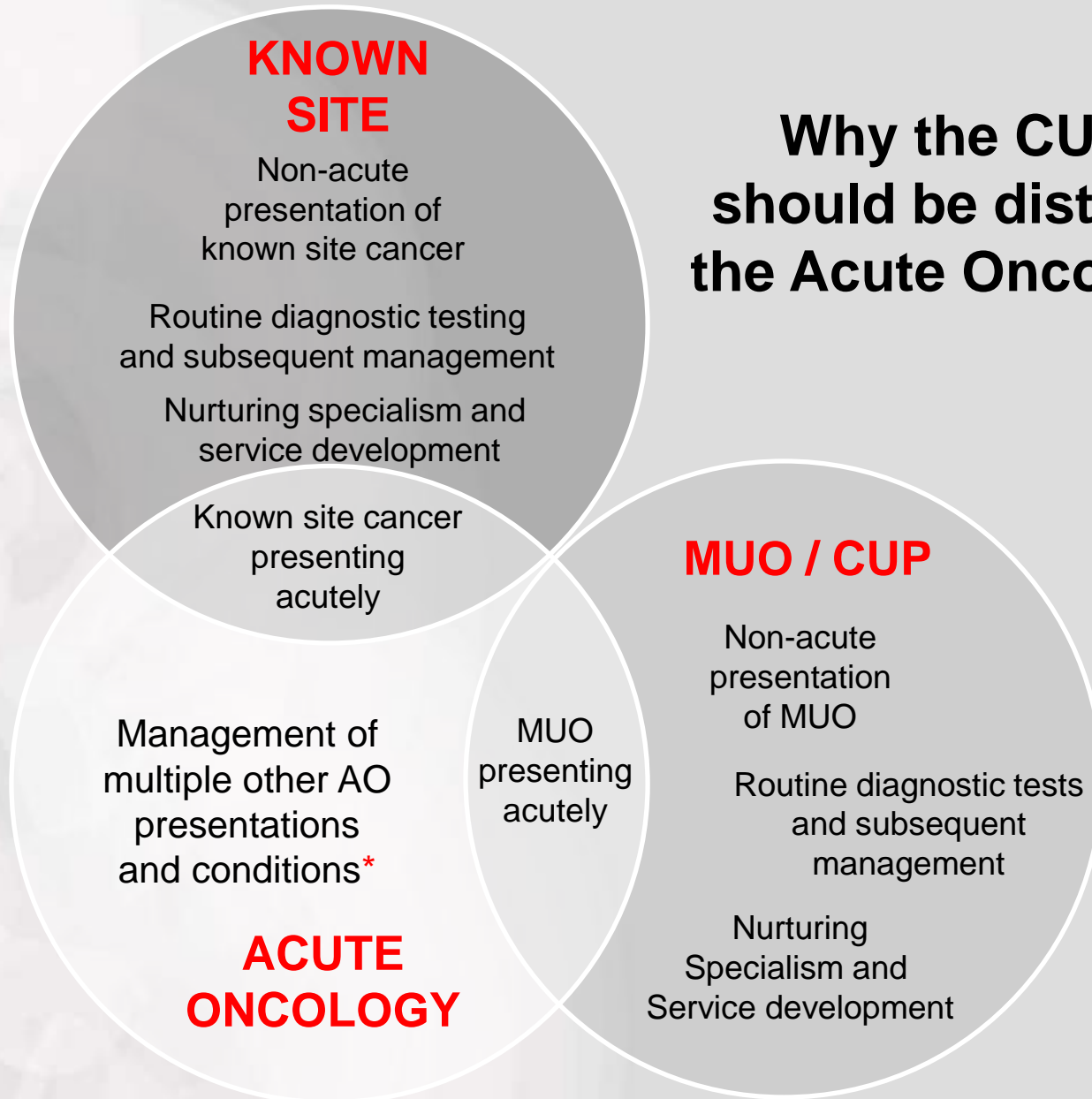
- New definitions are now embedded
- CUP Teams and MDTs at some hospitals
 - “86% of Trusts have a pathway in place for MUO”
- CUP Specialist Nurses appearing
- Rapid review of MUO patients as part of AO
- Advice, symptom control, support emerging
- MUO clinics: a rarity
- CUP NSSGs – AO linked - ? desirable
- CUP data collection: aided by Somerset CR

Where do we need to get to next?

Outcome of the CUP Measures process

- Final Draft - 20/4/12
- CUP Teams confirmed
- Weekly CUP MDT confirmed
 - Probably as part of single other MDT
- CUP NSSG confirmed
 - May be integrated with AO SSG – needs care!
 - Important to address whole clinical course
- No CUP Specialist MDT
 - SSG will need to foster “specialist” activities

Why the CUP SSG should be distinct from the Acute Oncology SSG



*eg: MSCC, treatment toxicity, symptom control, complications of known cancer, admission avoidance

Where do we need to get to next?

Outcome of the CUP Measures process

- Final Measures are a reasonable outcome
- Properly implemented they will improve care

How are we going to get there?

Ideas for Implementation, Identifying Barriers

- Identify drivers of change:
 - Acute Oncology developments
 - AO / CUP Consultants!
 - NCIN / MDT Coordinators / Somerset Registry
 - NICE referral guideline update
 - NHS QIPP / Reform strategy / Efficiency

How are we going to get there?

Ideas for Implementation, Identifying Barriers

- Identify drivers of change:
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 - **Learn from working examples**

How are we going to get there?

Ideas for Implementation, Identifying Barriers

- Identify risks and barriers:
 - Compromise on CUP NSSGs
 - Must have distinct identity, alongside the AO SSG
 - Compromise on CUP Specialist MDT working
 - Where will the reference centres be?
 - What will drive progress in cCUP treatment?
 - Loss of momentum awaiting Measures
 - CUP Teams: a very different way of working
 - Development during a double-dip recession...

Managing the Patient Pathway

- 1) A demonstration of how to implement CUP services, and the benefits this brings
- 2) Evidence to support the need for efficient services, based on the size of the problem
- 3) Sharing ideas, experience and suggestions

Managing the Patient Pathway

Discussion on routes forward

- Ideas
- Experience
- Suggestions
- Setting the future agenda for progress