



Hunts Community Cancer Network Cancer care in the community a new approach







Current cancer care 2010-12

Unaffordable Unsustainable Ineffective to detect recurrence Ineffective to manage symptoms] Insensitive to late adverse effects





The University of East Anglia pilot evaluation in 2014 found a 1:5.9 cost return

Out of the 7 pilots , we were the only one to be officially commissioned after the 2 year study ended

We expanded from 9 to 23 Surgeries and recruited 5 extra staff



"Living with and Beyond Cancer" category of the national 2014 Quality in Care Oncology Awards





Our Nursing Team



1 x Band 7 (PT – 27.5hrs)

- 2 x Band 6 (FT)
- 2 x Band 6 (PT 25hrs & 32hrs)
- 1x Band 5 (PT)
- 1 x Band 2 (FT)
- 1 x Band 2 Admin (PT 30hrs)

Who works where



How we work:







Self Directed After Care (SDAC)



Patients Recovery...

$EOT \longrightarrow 3mths \rightarrow 6mths$

Consultant: Risk stratify at MDT. Discuss and agree with patient for SDAC

CNS – Moving Forward Interview – signs
and symptoms, late effects, 5yr surv plan
– hospital episode of care closed here

HCCN/Survivorship team: HWBE (pt ed), offer other support, How to re-access, Remote Surv tracking

> GP – Cancer Care Review within 6mths

Re-access: - Pt/GP to contact HCCN/CNS if OOA
- GP to do a new urgent rereferral back into hospital care
- HCCN/CNS to fast track back into the system in tandem, care co-ordination/MDT review etC

5 years





HCCN – The Charity

The Trustees



- HCCN is fortunate to be partnered with Hunts Community Cancer Network – The Charity.
- Run by Volunteers
- While the NHS funds the nursing service through CCG funding, every other aspect of the support we offer to people is provided through the HCCN charity free of charge.





HCCN – The Charity

Return to Exercise	Emotional Wellbeing	Nutrition
 Circuits Yoga Tai Chi 	 Patient to Person Counselling Image 	 Prof Thomas World Cancer Research Fund Conference



HCCN & SDAC



- * David, 65. Whipples and adjuvent chemo
- * Support through chemo, AOS/fortisips, bt etc
- * Exercise referral
- * Ongoing distance support, pre clinic bloods
- * There at the end of a phone



HCCN & SDAC



- * Sarah, 67. inoperable metastatic pancreatic
- * Pre chemo bloods, pump removal at home
- * Counselling, psychological support
- * Pain management, nutrition
- * AOS fluids



HCCN & SDAC



* Amanda 72, widow

* 2004 WLE and ANC, radiotherapy

* 2016 ER PR positive, HER negative, mastectomy





What Our Patients Say About HCCN https://www.hccn.org.uk/patients-perspectives