

**Disclosure Statement:**

**Joint working project between Northern Centre for Cancer Care (NCCC) as part of The Newcastle upon Tyne Hospitals NHS Foundation Trust (NuTH)  
And Bristol-Myers Squibb Pharmaceuticals Ltd**

<b>Name of Project</b>	Reducing Time to Treatment Administration (RTTA)
<b>Project Overview</b>	<p>The increasing number of I-O therapies, the increasing number of indications of these I-O therapies and the consequent increase in numbers of patients that could be treated with these medicines, indicated to the NCCC Directorate Management Team that service provision will be subject to increasing pressure that could jeopardise the centres ability to maintain performance against cancer wait times, specifically the part of the pathway that covers the span between the point of decision to treat and the administration of treatment. For this reason, it has been decided to prioritise this aspect of the total patient pathway and consider it prudent to initiate a project to consider:</p> <ul style="list-style-type: none"><li>• How to alleviate the capacity pressure point at the point of administration of oncology/haematology medicines in the infusion suite at the NCCC, giving specific attention to:</li><li>• the growing numbers of tumour types (<i>viz.</i> lung, renal, bladder, head and neck) where I-O therapies would be included as part of clinical management;</li><li>• rapidly escalating numbers of patients in whom I-O therapies would be a treatment option in the future;</li><li>• consideration of key capacity constraints such as SACT, outpatients, staff and resources;</li><li>• a safe, sustainable, efficient and integrated service model for both now and in the future</li></ul>
<b>Project Objectives</b>	<p>Despite NCCC consistently meeting the cancer waiting time targets. The experience of Health Care Professionals suggest that many patients experience additional anxiety from the time of 'decision to treat' whilst 'waiting' for their treatment to be administered.</p> <p>NCCC team acknowledges that pre-treatment assessment clinics and the anticancer treatment administration unit are experiencing increasing demand on their limited capacity. Without action an additional demand on the service from the increased use of I-O therapies could result in either greater waiting times for the patients or a breach of governmental 'cancer waiting time' metrics.</p> <p>NCCC is seeking to ensure that the 'waiting' time is minimised by maximising the efficiency of the process, staffing and skill levels, resources including estates and ensuring that potential opportunities afforded by other services, such as treatments administered at alternative venues 'closer to home' have been explored</p> <p>NCCC has selected to start with the "decision to treat" (DTT) part of the pathway. If this part of the service is rendered inadequate to cope with the expected growth in patient numbers and the increasing demand on services that will result from use of I-O therapies, then no matter how efficient the earlier parts of the pathway are this will not reduce the waiting time for patients from DTT to treatment the 31day Cancer Waiting Target.</p>

<b>Patient Benefits</b>	<ul style="list-style-type: none"> <li>Improved patient experience and allaying some of the anxiety felt by some patients about the waiting time to administration from the time of decision to-treat</li> <li>A service that meets the patient/service user requirements and needs and is consistent with person-centered values (for example: choice, control, independence, empowerment)</li> <li>Improved patient experience through provision of a streamlined, efficient and patient-focused service.</li> </ul>
<b>Stakeholders</b>	<p>Northern Centre for Cancer Care (NCCC) at Newcastle upon Tyne Hospitals NHS Foundation Trust (NuTH)</p> <p>Bristol Myers-Squibb (BMS)</p>
<b>Timelines</b>	The Project will start from the date on which the disclosure statement goes live on the BMS Pharmaceuticals Ltd website and will finish 12 months after this date.

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