Gloucestershire Safety & Quality Improvement Academy



# Cancer Pathway Improvement

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### 1. Background

As you will already be aware the Trust's Cancer target is a high priority, but one unfortunately we have not been able to meet in Gynaecology since April 2017 for 2WW referrals and even longer for the 62 day target.

Meeting the national targets is not only important for the Trust, it is important to make a diagnosis early in the pathway to ensure the patients receives the correct care in a timely manner.

# 2. The Aim of the Project

The aim of the project is to improve the Cancer pathway to ensure the Di-

It is vital to have a clear pathway with a clear plan of expectations and responsibilities which also includes clear time restraints. By achieving this the whole patient experience will be improved, which will in turn result in improved staff wellbeing.

# 3. Stakeholders

The key members of the team I have been working with are:-Richard Hayman (Sponsor), Judith Hernandez, Information Department, Rob

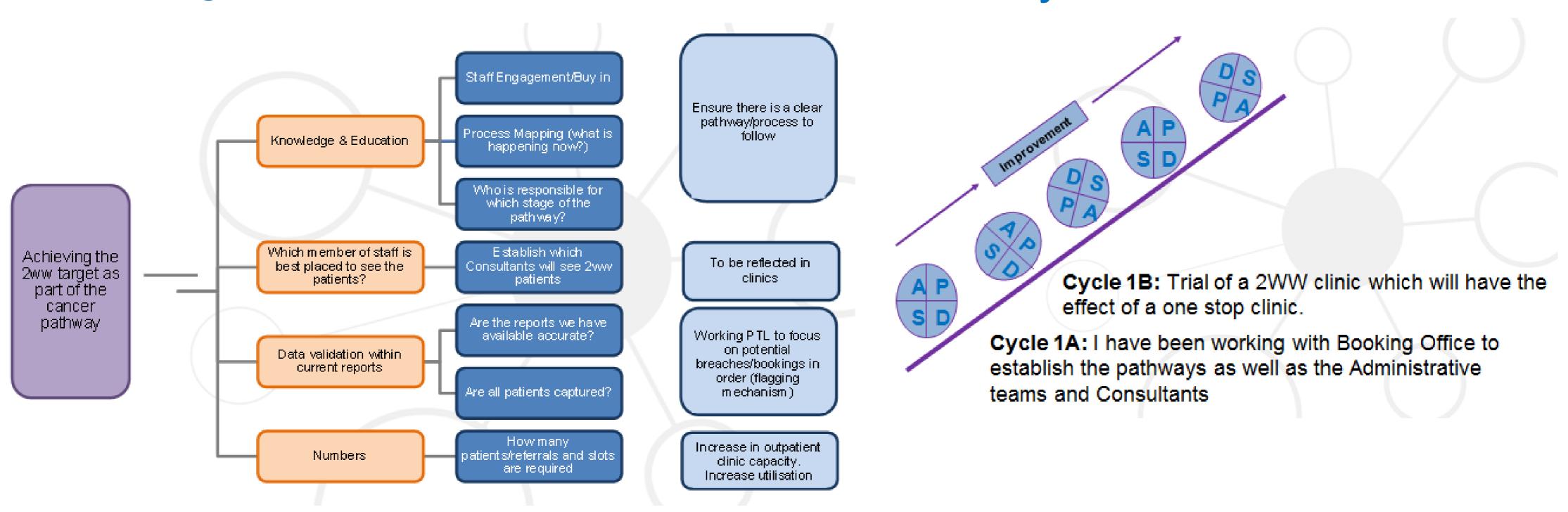
Gornall, Nursing Staff, Kate Newlove (MDT Team), Outpatient Staff, Cancer Lead, Admissions Staff, Secretaries, Histology and the Booking Of-

vision meets the current cancer targets, starting with the 2ww part of the pathway which will in turn lead to meeting the 62 target.

**5. PDSA Cycles** 

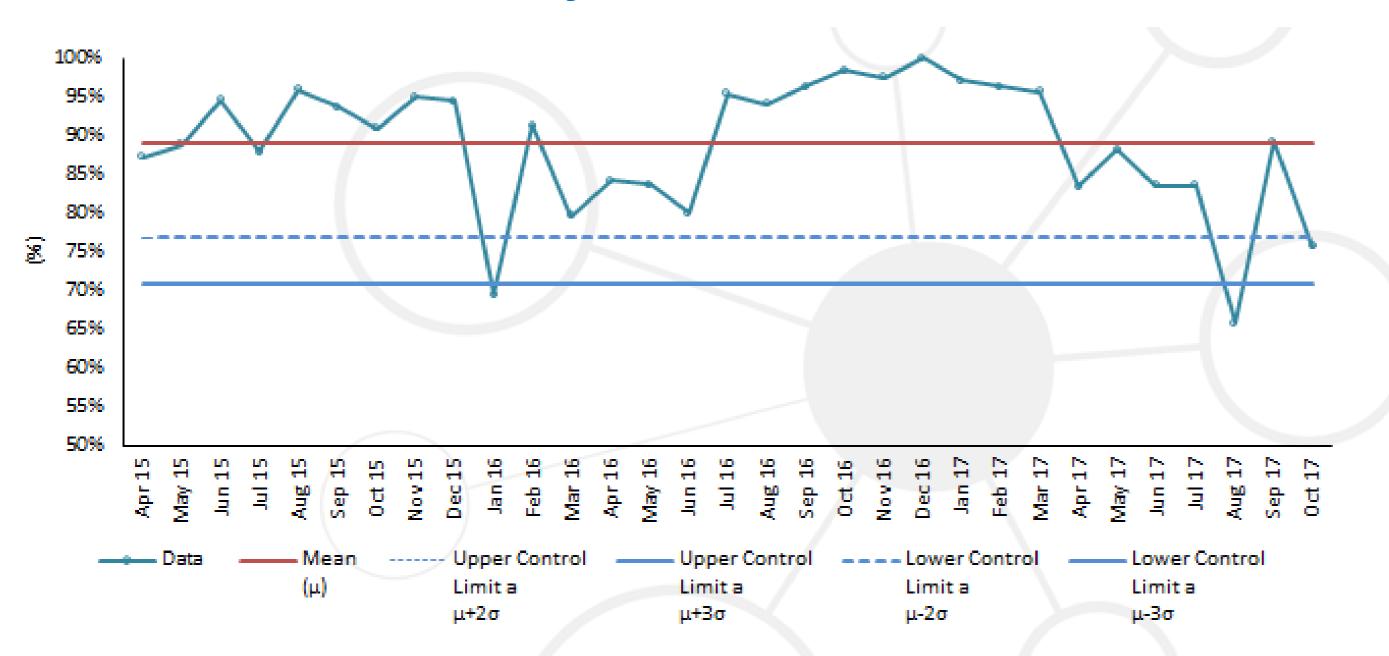
Additional stakeholders will be GP's and possibly the CCG in the future.

#### 4. Driver Diagram



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#### 6. Measurements and Key Results



7. Next Steps

The SPC chart above shows the percentage of patients seen within 2 weeks. The target has not been met since April 2017. The August 2017 highlights a potential capacity issue due to it being 'holiday season'. Currently we are in the process of setting up a pilot Cancer Exclusion Clinic which will be run on a Friday afternoon on a weekly basis, starting with 2 Consultants which we plan to have up and running before Christmas. The intention is to make this a one stop clinic going forward.

If the current breaching backlog can be cleared, new 2ww patients should be seen within 7 days, diagnosis made by day 31 and treated by day 62.

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