

Faster Cancer Treatment: Improving Patient Pathways

Round One 2014/15

Computerised tomography colonography scanning – Northern Cancer Network

The Northern Cancer Network will develop, deliver and monitor a pilot of computerised tomography colonography scanning for patients with a suspicion of bowel cancer across the Northland, Auckland, Waitemata and Counties Manukau DHBs.

Implementation of a gynae oncology registry – Auckland DHB

Auckland DHB will map patient pathways, develop a plan to address bottlenecks to care and supporting changes to information management, and implement a gynae oncology registry. The registry will align with the needs of other national service providers. Auckland DHB will cover the cost of establishing the web-based database.

Implementing HealthPathways for cancer – Capital & Coast DHB (lead)

Capital & Coast DHB will work with Hutt Valley and Wairarapa DHBs to develop at least 20 localised clinical pathways for general practitioners to follow when referring patients with suspected cancer to secondary services. The Pathways will be published on HealthPathways, an online web portal for clinicians that is a source of health services information.

Improving access to cancer services – right person, right time, right place – Tairāwhiti DHB

Tairāwhiti DHB will analyse potential service improvements within tumour streams (with an initial focus on breast and urological tumour streams), develop a streamlined pathway and service pilot, and implement service improvements based on these findings.

Improving histology and cytology report turnaround – Auckland DHB

Auckland DHB will reduce histology and cytology report turnaround times by training scientists to support fine needle aspiration diagnostic procedures, extending their dissection skills to enable them to complete more complex cases, and applying lean process redesign in cut-up, processing and main laboratory processes to reduce waste. Included in this will be the process design and standard work for a future tracking system.

Improving referral to prioritisation process – Lakes DHB

Lakes DHB will review their current cancer triaging processes for general surgery, gynaecology, ear nose throat, general medicine and orthopaedics, review options to improve timeliness of cancer care, and start planning and implementing the options identified. Education and support will be provided to primary care services to improve linkages and streamline processes between primary and secondary care.

Improving the breast cancer patient pathway – Whanganui DHB

Whanganui DHB will improve the patient pathway by allowing GPs to refer people with a suspicion of breast cancer to an imaging and screening service at the same time as referral to first specialist appointment. Referred patients will get radiological assessment and biopsy at one appointment, and receive a confirmed diagnosis at the first specialist appointment.

Improving the cancer care pathway for Māori – Nelson Marlborough DHB

Nelson Marlborough DHB will review the cancer care continuum for Māori patients in the Nelson Marlborough district and provide a detailed cancer needs assessment. This will enable the DHB to understand the incidence and impact of cancer for Māori in Te Tau Ihu, map the current patient pathways for Māori cancer patients and identify issues and propose solutions that support and enhance the journey for Māori cancer patients that will contribute to improved outcomes. Recommendations for improvements will be provided and implemented.

Improving the gynaecological cancer patient pathway – Capital & Coast DHB

Capital & Coast DHB will work with the Central Cancer Network to establish a gynaecological cancer centre for the central region, develop and implement a short term plan to mitigate risks around current workforce vulnerability, and implement service improvements identified by the review of current service provision against the Standards of Service Provision for Gynaecological Cancer Patients in New Zealand.

Improving the lung cancer pathway – Midcentral DHB

MidCentral DHB will streamline the patient pathway for lung cancer patients by considering the pathway as a whole, identify issues and implement solutions as appropriate. The work of the Cancer Nurse Coordinator, previous local research on improving access for Māori with any cancer, the efforts of the smoking cessation team and learnings from national models currently in place to improve outcomes, will be brought together to inform the development of the pathway. Identified improvements will be implemented as possible. MidCentral DHB will also develop resources to support health professionals to better understand the signs and symptoms of lung cancer.

Improving the lung cancer patient pathway – Taranaki DHB

Taranaki DHB will develop a pathway of care for patients with a high suspicion of lung cancer. This will include reviewing the current pathway, developing and testing new processes such as a dedicated lung cancer clinic, a one-stop-shop model, direct diagnostics access and pathways for investigations and treatment outside of the DHB.

Improving the urology cancer patient pathway – Taranaki DHB

Taranaki DHB will review the urology cancer patient pathway and develop new pathways to ensure timeliness of investigation, follow up and referral. A clinical nurse specialist will work alongside a project manager to support the development and implementation of the pathway.

Māori and Pacific patient navigation pilot in Auckland and Northland District Health Boards – Northern Cancer Network

The Northern Cancer Network will run a one year pilot with Māori and Pacific Cancer Patient Navigators at Auckland and Northland DHBs. The Navigators will develop strategies and resources that actively seek to address challenges facing Māori and Pacific cancer patients and encourage the integration of these learnings into the overall delivery of cancer services in Auckland and Northland DHBs.

Medical oncology production planning – Auckland DHB

Auckland DHB will establish production planning procedures to support management of patient flow in the medical oncology service to ensure patients receive timely treatment. Planning processes will be reviewed across tumour types, test improvements in one tumour stream, and roll out production planning across other tumour streams.

Midland Regional Service Improvement Initiatives – Midland Cancer Network

The Midland Cancer Network will map inter-DHB referral pathways across the Midland region and develop a mechanism to identify and monitor patients on the 62 day pathway. They will also develop a repository of information resources for patients with cancer, identify and adopt an education tool for cancer nurse specialists around supportive care, and coordinate a DHB self-assessment, stocktake and gap analysis against the supportive care component of the tumour standards. A Midland gynae oncology model of service will be developed and implemented.

Modelling to improve the booking and scheduling process for cancer patient – Waitemata DHB

Waitemata DHB will develop a dynamic stochastic model that will identify opportunities to optimise patient flow through the cancer pathway. The identified opportunities will be adopted.

Nurse endoscopy – registered nurse expanded practice training and credentialing programme – Northern Cancer Network

The Northern Cancer Network will develop a training and credentialing programme that ensures clinical knowledge and skills required by registered nurses to perform endoscopy to a minimum level of competence. This will increase, over time, the region's capacity to deliver increased endoscopy services and reduce wait times. This work will link in with the national work programme around nurse endoscopy.

Psychosocial care pathway – Central Cancer Network

The Central Cancer Network will develop a Supportive Care Framework which includes an agreed set of overarching principles and components of supportive care delivery that are implemented in a patient centred, consistent and quality manner to ensure the supportive care needs of patients and their family/whanau are continually identified and addressed by an informed, skilled and cared for workforce.

Radiology diagnostic service improvements – Northern Cancer Network

The Northern Cancer Network will work to improve the diagnostics referral process, and develop and introduce oncology imaging protocols based on the best evidence-based approach to imaging where cancer is suspected. This work will be across tumour streams.

Regional capacity and demand for computerised tomography colonography – Central Cancer Network

The Central Cancer Network will identify current capacity and demand for computerised tomography colonography across the central region and develop a regional implementation plan.

Services improvements for cancer patients – Bay of Plenty DHB

Bay of Plenty DHB will deliver a series of projects focussed on improving the patient pathway, including developing a direct process for referral to diagnostics, information resource about the cancer journey for Māori patients and their whanau, decision support tools, a process for same day booking of first specialist assessment and pre-assessment, an electronic notice of admission process using existing IT infrastructure and of electronic pathways. They will also review and redesign scheduling processes and existing patient resource material.

Single point of access clinics for lung cancer patients – Northern Cancer Network

The Northern Cancer Network will establish a single point of access lung cancer clinic which will allow patients in the Northern region to receive first specialist assessments and diagnostic activities, including computerised tomography scans, fine needle aspiration, biopsy extra thoracic lesion and bronchoscopy, on the same day.

Support for the delivery of cancer care in the community – Capital & Coast DHB (lead)

Capital & Coast DHB will work with Hutt Valley and Wairarapa DHBs to develop a sustainable ambulatory model of care for medical oncology, haematology, transfusions and radiation treatment and implement resulting changes to care delivery. This project includes developing options and a service model for Outreach Chemotherapy and aligning the function of the community cancer nurses across the three DHBs.
