Scottish Cancer Coalition
Priorities for Action

The Scottish Cancer Coalition is a partnership of 21 voluntary organisations dedicated to improving cancer services and outcomes for patients in Scotland, and promoting research and prevention efforts.

The Scottish Cancer Coalition welcomes the work of the Scottish Cancer Taskforce in progressing the aims of Better Cancer Care. We recognise the importance of the Healthcare Quality Strategy in driving improvement in cancer services in the future and look forward to seeing continued momentum in the areas where improvements are already underway. We believe that the voluntary sector has a key role to play in delivering improvements for people affected by cancer, and we look forward to working in partnership with the Scottish Government, the NHS and others to achieve this.

This document sets out the key areas where we believe that further commitment is required and makes suggestions for action.

### Making care person-centred
Cancer services should be focused on the individual needs of patients and their families. Patients' holistic needs – physical, emotional, spiritual, financial and practical are not always identified or addressed.

Each patient should receive a personal care plan based on a holistic assessment of their needs and extending to the post-treatment phase.

Patients also tell us that they value having a single point of contact in their medical team.

These changes would help to support many patients to self-manage their condition after treatment and could therefore potentially free up resources and capacity for more complex cases.

We want to see:
- existing progress in the area of holistic needs assessment identified
- assessment and care planning implemented for all cancer patients
- improved information and support to encourage self-management
- a better follow-up system and improved post-treatment care to support cancer survivors
- the right palliative and end of life care for each patient

### Coordinating care
Cancer patients tell us they want their care to be properly coordinated, across the different parts of the statutory sector and both during and after treatment. To achieve this, we need better coordination of health and social care services and between acute and primary care. Particular attention should be given to transition points such as at the end of treatment and when patients are nearing end of life.

Clinical Nurse Specialists (CNS) play an important role in coordinating care. However we know that there is unequal access to CNS and there is evidence of specialist nurse time being lost.

We want to see:
- a commitment to joint planning of health and social care services
- improved joint planning of individual patient care across acute and primary care services
- extra support for patients at key transition points
- data on specialist nurse provision across Scotland
- research into the role of CNS and the extent to which coordination of care needs are being met
- the findings used to inform practice and help assess the best utilisation of resources
A focus on early detection
We warmly welcome the Detect Cancer Early initiative and look forward to working with the Government on its delivery.

We want to see:
• improved public awareness of signs and symptoms
• research into the barriers that stop people presenting symptoms to the doctor; and a strategy for hard-to-reach communities
• improved GP and other healthcare professionals’ awareness
• a review of referral processes
• timely access to diagnostics
• increased uptake in all screening programmes

An end to cancer inequality
We know that there are still inequalities in terms of access to services and treatments and inequalities of outcomes.

New processes should improve equity of access to cancer drugs, but there is still unequal access to treatment more generally: for example, new radiotherapy technologies or surgical techniques; and to both cancer and supportive services.

We want:
• patients to know what services are available to them; and
• have equal access, irrespective of cancer type, geography, age, gender, socio-economic status, ethnicity, faith or disability

Information to empower and improve
There is a plethora of audit data collected, however we want to ensure that patients have the information they need to make informed decisions about their cancer treatment and care, and that NHS Boards are able to assess and improve their services to cancer patients.

We want to see meaningful data relevant to patient experience, service quality and health outcomes collected, collated and acted upon.

This includes:
• commissioning a dedicated cancer patient experience survey
• creating a supportive culture within the NHS for learning from patient experience and assessing and improving the quality of services
• identifying dedicated outcome measures for patient experience and incorporating these into the new quality framework
• supporting initiatives to make accessible information available for patients regarding treatment and care options and their availability

Action on prevention
It is estimated that up to half of all cancers could be prevented by healthy lifestyles. In addition to non smoking, body weight management, active living, healthy food choices, low alcohol intake and staying safe in the sun offer opportunities for reducing cancer risk.

We want to see:
• improved public awareness of ways to reduce cancer risk
• opportunities for ‘teachable moments’ for prevention messages to be identified and supported

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