

Cancer leads need to make services as 'appealing' and 'efficient' as possible

Cancer nurses need to embrace change and concentrate on quality of services, according to England's chief nursing officer Chris Beasley.

Professor Beasley was speaking to UK Oncology Nursing Society members at their first conference held in Manchester last month.

She acknowledged concern among delegates about potential cuts to services but said cancer leads needed to make services as efficient as possible.

'There is still a lot of waste in the system. We can do a lot of



STEPHEN ANSTEY

Chris Beasley



Nasrim Khadim at UKONS conference

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what we do more efficiently. And many cancer nurses are already leading the way in this,' she said.

Tameside and Glossop NHS Acute Trust assistant director of nursing Nasrim Khadim asked how cancer nurses could make their services more appealing to trust boards.

Professor Beasley replied that she had noticed the language of board members had changed. 'They are now really interested in quality. They want quality services and so do the patients. We are now in a climate of who

cares wins. Cancer nurses need to be at the forefront of high-quality services,' she said.

Professor Beasley said competitive behaviour expected of cancer networks is good because it gets more 'grit into the system'.

'I know it can be very difficult when organisations change, but what matters most is the patient. I hear from patients about their care and what comes through is that the technical care they received was great but their overall care left something to be desired. It has been said that

everyone cares, but not everyone is caring. 'Patients will know maybe more than you do about their condition. It is not surprising sometimes we get some of it wrong and our patients don't get the best experience.'

Professor Beasley said cancer is now a long-term condition and nurses needed to think about what that means. 'A cancer nurse should help patients live life to the full and help towards a better death.'

The conference, Authority, Influence and Power – the challenges of being a lead clinical nurse, was attended by more than 100 cancer nurses from around the UK. It also heard from Department of Health's policy lead for supportive and palliative care, Sue Hawkett, and Macmillan Cancer Support's director for improving cancer services, Jessica Corner.

The conference also heard from Professor Alison Richardson. To read her speech go to page 18.

Nurses to run clinical trials in N Ireland

Five new research nurses have been deployed in cancer units across Northern Ireland in order to co-ordinate and run clinical trials in breast, lung, colorectal, prostate, bladder and haematological cancers. The initiative is being run jointly by Cancer Research Northern Ireland and the DHSSPS and will be funded for six years. Senior research nurse Ruth Boyd said: 'These new nurses will provide information, care and support for cancer patients who want to take part in a clinical trial based at a cancer unit close to their home.'

Hormonal therapies given green light

Hormonal therapies have been recommended by National Institute for Health and Clinical Excellence (NICE) for the treatment of women with early breast cancer.

Anastrozole, exemestane and letrozole were given the go-ahead last month to treat women with oestrogen-receptor-positive invasive breast cancer following surgery to remove the cancer. The treatment aims to

decrease the likelihood of the cancer returning.

NICE's decision has been welcomed by breast cancer charities. Breast Cancer Care nurse consultant Emma Pennery

The decision means patients finally have access to the most appropriate treatment

said: 'Women we spoke to during the consultation for this guidance told us just how much difference it can make to have

access to a variety of effective treatments that could reduce the risk of their breast cancer returning.'

A Breast Cancer Campaign spokesperson said: 'The decision means patients finally have access to the most appropriate treatment for this type of breast cancer on the NHS and we hope that all primary care trusts make adequate plans to ensure the guidance is implemented as soon as possible.'

Bowel cancer care improves

Audits of health services have shown improvements in bowel cancer care and treatment over the last five years.

A Healthcare Commission audit has found that more hospitals are meeting National Institute for Health and Clinical Excellence (NICE) bowel cancer guidelines. The data also shows that post-operative mortality rates are consistently falling.

The data aims to give patients an understanding of bowel cancer and some information on length of hospital stay and types of treatment most commonly offered to patients. The data is the first step towards helping bowel cancer patients make judgements about the care they are offered.

Information was collected from a third of all UK hospitals from 18,539 patients' records. By providing a picture of care on a broad range of measures it helps hospitals assess how good their services are for bowel cancer patients and bring about any necessary improvements.

Healthcare Commission's head of clinical audit and patient outcomes Dick Waite said: 'The audit has identified that there have been significant improvements in the delivery of care to bowel cancer patients over the five year audit period. This audit allows clinicians to compare their performance against others and against national standards.

'This will drive improvement so patients can receive

care that meets national standards.'

An audit is also taking place on the treatment received by head and neck cancer patients.

The audit, the second of its kind, is being done on behalf of the Healthcare Commission in collaboration with the British Association of Head and Neck Oncology Nurses.

The information will be used to improve head and neck cancer services.

'Reform' to build on networks

Plans for a new cancer reform strategy have been outlined that will build on the progress of the *NHS Cancer Plan*.

Health Secretary Patricia Hewitt announced the strategy at the Britain Against Cancer conference in Westminster on November 30: 'Having developed the foundations of a world-class cancer service we have to make it self-sustaining.'

She said cancer specialists had to build on their networks to create 'flexible and innovative local services that

respond to patients' needs'.

National Cancer director Mike Richards will work with cancer specialists to develop the strategy.

He said: 'We now need to deliver high quality care to everyone with cancer and to get the best possible value for money within the NHS. We need to maximise the opportunities for prevention and early diagnosis and to shift care from inpatients to outpatients and from hospital to community.'

In brief

The Prostate Cancer Charity has produced a diet fact sheet to help men improve their diet to help prevent cancer. The foods which may affect the risk of prostate cancer are listed as well as tips to eat healthier. Prostate cancer survivor Peter Loader has followed some of the diet tips. 'Swallowing three large teaspoons of tomato puree a day might seem a little odd by the lycopene in processed tomatoes has been shown to help.' Copies are available from www.prostate-cancer.org.uk/pdf/toolkit/diet.pdf

An international agreement to support collaboration in cancer control was renewed by the US, Northern Ireland and the Republic of Ireland this week. The Ireland-Northern Ireland-National Cancer Institute (USA) Cancer Consortium, which was first established in 1999, aims to enhance cancer research, care and treatment in Ireland. The renewal agreement was signed in Belfast and will expand joint research and training.

Two major clinical trials in women with early stage breast cancer have shown that changing the package of chemotherapy drugs given after surgery can reduce the risk of women dying of the disease by more than 30 per cent, compared to standard therapies. The trials looked at the experience of 2,400 women at 75 treatment centres across the UK. The trials, published in the *New England Journal of Medicine*, found adding the drug Epirubicin to chemotherapy had a significant impact on survival.

Cancer nurses have inspired George Michael to organise a nurse-only concert in tribute to care given to his mother who died of skin cancer. George will perform to an audience of nurses in London on December 20.

Since the death of his mother from skin cancer in 1997 George has thanked cancer nurses by supporting Macmillan Cancer Support.

He said: 'Almost

ten years ago, during the last week of my mother's life, I told my friends and family that if I ever played my own concerts again, I would make sure to do a free one for nurses. The nurses that helped my family at that time were incredible people, and I realised just how undervalued these amazing people are.

And so I want to thank them with a Christmas concert, I can't wait.'

