

NHS Ayrshire & Arran



Meeting:	Ayrshire and Arran NHS Board
Meeting date:	Monday 5 February 2024
Title:	Redesign of Systemic Anti-Cancer Therapy (SACT) delivery in Ayrshire and Arran.
Responsible Director:	Derek Lindsay, Director of Finance
Report Author:	Derek Lindsay, Director of Finance

1. Purpose

This is presented for:

- Awareness

This paper relates to:

- Government policy/directive

This aligns to the following NHSScotland quality ambition(s):

- Safe
- Effective
- Person Centred

2. Report summary

2.1 Situation

The Cabinet Secretary for NHS Recovery, Health and Social Care has approved the Board's proposal to retain on a permanent basis the interim model of Systemic Anti-Cancer Therapies (SACT) services in Ayrshire and Arran.

2.2 Background

During the pandemic, there was a need to make changes to protect cancer patients who were immunocompromised from the dangers within a hospital environment. This led to the cancer services in Station 15 at Ayr Hospital, which comprised inpatient beds and outpatient chemotherapy service being moved to alternative sites. The outpatient chemotherapy service was moved to Kyle unit on the Ailsa Hospital campus, Ayr site and inpatient beds on ward 3A at Crosshouse Hospital were increased.

Healthcare Improvement Scotland indicated that they view these changes, which were made on an interim basis, as major service change and therefore required public consultation on making them permanent. The clinical view is that the centralisation of the inpatient ward and Tier 2 (high risk) day case at University Hospital Crosshouse

cannot be reversed for clinical safety reasons therefore this did not form part of the consultation. The consultation focused on the move of outpatient SACT delivery from Station 15 at Ayr Hospital to Kyle unit on Ailsa Hospital campus, Ayr which has been very well received by both staff and patients with improved car parking, better accessibility and a much more spacious environment for delivery of the service. The smaller volume move of high risk outpatient services to Crosshouse did increase journey time for some patients.

The consultation report came to the public Board meeting on 14 August 2023. Healthcare Improvement Scotland (HIS) have indicated that the consultation had taken an open and inclusive approach and the HIS report was received at the Board meeting on 9 October 2023 along with an Equality Impact Assessment. The Board approved the proposal to make the changes permanent.

2.3 Assessment

Following approval by the NHS Board at its meeting on 9 October 2023 a letter was submitted to the Cabinet Secretary for NHS Recovery, Health and Social Care, with supporting paperwork, to seek approval for NHS Ayrshire & Arran's proposal to retain the interim model of Systemic Anti-Cancer Therapies (SACT) service delivery implemented during the pandemic.

The Cabinet Secretary wrote to the Board Chair on 15 December to advise that he was content to approve the Board's proposal, noting the compelling case for retaining the change that has been made. He noted that this was supported by the vast majority of local stakeholders following an engagement process which NHS Ayrshire & Arran had conducted in a meaningful and inclusive way in line with national guidance on effective engagement and consultation.

The letter is provided at Appendix 1.

2.3.1 Quality/patient care

The ultimate aim of the West of Scotland Strategic Review of systemic anti-cancer therapy (SACT) services was to ensure high quality, safe and sustainable SACT services across the west of Scotland.

The emerging service model aims to:

- improve patient experience and outcomes;
- deliver treatment in the most clinically appropriate place;
- ensure consistency of pathways and processes;
- provide equitable access to treatment, including access to clinical trials; and
- optimise resource use.

2.3.2 Workforce

Staff who worked in station 15 at Ayr Hospital have moved to the Kyle Unit and their feedback to the change is positive. Now that a permanent change is approved an organisational change process will involve these staff. The designation of University Hospital Crosshouse as the Ayrshire cancer unit is because of the adjacency to other essential medical and support services.

2.3.3 Financial

In 2023/2024 revenue plan an investment of £530,000 per annum was made in additional staffing for the haematology ward.

2.3.4 Risk assessment/management

Continued development of risk assessed services to support care closer to home where safe to do so.

2.3.5 Equality and diversity, including health inequalities

The SACT service change equality impact assessment (EQIA) was submitted to Board on 9 October 2023.

2.3.6 Other impacts

- Best value
 - Vision and Leadership
 - Governance and accountability
 - Use of resources

2.3.7 Communication, involvement, engagement and consultation

Robust engagement has taken place with SACT patients and staff throughout the temporary changes. A Chemotherapy Oversight Forum and Stakeholder Reference Group were established to plan and progress all engagement and consultation activity in relation the redesign of SACT service delivery. An extensive public consultation has been undertaken with a range of methods for people to engage and share their views. Regular communications have been circulated both internally and externally before, during and after the consultation period. The feedback, views and suggestions of people and communities that have been put forward within the scope of the consultation have been considered and used to help inform the decision-making process. A full consultation report was considered at the Board meeting on 14 August 2023.

2.3.8 Route to the meeting

The content discussed in this paper has been considered and supported by the Chemotherapy Oversight Forum and Corporate Management Team.

2.4 Recommendation

For awareness. Members are asked to note the Cabinet Secretary approval.

3. List of appendices

The following appendices are included with this report:

Appendix 1 – Letter of approval from Cabinet Secretary.

Cabinet Secretary for NHS Recovery, Health and
Social Care
Michael Matheson MSP



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Lesley Bowie
Chair
NHS Ayrshire & Arran

By e-mail: aa-uhb.ceo@aapct.scot.nhs.uk

15 December 2023

Dear Lesley

NHS Ayrshire & Arran: Systemic Anti-Cancer Therapy (SACT) services

Thank you for your letter of 26 October 2023 and the accompanying papers seeking approval for NHS Ayrshire & Arran's proposal to retain the interim model of Systemic Anti-Cancer Therapies (SACT) service delivery implemented during the pandemic. This proposal was endorsed by the Board of NHS Ayrshire & Arran at its meeting on 9 October 2023.

Having carefully considered all the available information, I am content to approve the Board's proposal. The Board has made a compelling case for retaining the change that has been made, which is supported by the vast majority of local stakeholders. The Board's proposal is fully consistent with both national policy and the tiered approach under the West of Scotland Strategic Review of SACT services; the ultimate aim of which was to ensure high quality, safe and sustainable SACT services across the region; whilst improving patient experience and outcomes; delivering treatment in the most clinically appropriate place; ensuring consistency of pathways and processes; providing equitable access to treatment, including access to clinical trials; and optimising the use of available resources.

I am also pleased to note that the view of Healthcare Improvement Scotland – Community Engagement, as the independent arbiters of how consistent Health Boards' activity is with national guidance on effective engagement and consultation, that NHS Ayrshire & Arran conducted this process in a meaningful and inclusive way, in line with the national guidance. I am also aware that the public consultation process highlighted some general concerns around transport to, and parking availability at, University Hospital Crosshouse and, in approving this proposal, I would ask that the Board keep this position under close review; carefully considering alongside key stakeholders what potential, sustainable solutions there may be to remedying these concerns.

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In conclusion, I am grateful to NHS Ayrshire & Arran for the considerable efforts that have been made to date in taking this proposal forward; adopting a clinically-based risk approach to maximise local access to services, as far as possible. I agree that the proposal will safeguard improvements to health and healthcare for the benefit of local people, for many years to come. I know the Board will appreciate the need to ensure that all local stakeholders continue to be kept fully informed and involved in the on-going development and delivery of these and other services.

Yours faithfully,



Michael Matheson

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