

Cancer Alliance

GM Consolidation of Oncology Outpatient Capacity Jackie Wrench¹, Lisa Galligan-Dawson², Sarah Lyon³

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Background & Introduction

At present, The Christie employs the Oncologists delivering outpatient care for patients in GM. However, there are three oncology outpatient models in place; Christie activity delivered at Christie; Christie activity delivered in localities; activity delivered locally via an SLA with the Christie. The project aims to consolidate all oncology outpatient appointments under The Christie. Clinics will still be delivered locally, but the booking, co-ordination, management of activity and recording would be via The Christie. This will maximise utilisation, allow activity to be flexed to meet demand (convert new to follow up or vice versa), allocate extra WLI sessions to meet waiting time needs, even out waiting times, and reduce variation. In effect, it will introduce a 'single queue' approach to the allocation of Oncology slots.

Project Rationale

- Not all outpatient capacity is effectively utilised; where SLAs are in place, the waiting list for this capacity comes from one Trust only, with variable demand.
- SLAs are based on 46-week cover, due to resource limitations. During periods of annual leave of sickness, waiting times vary significantly, with no ability to prioritise across the GM region.
- Waiting times vary significantly, with no overview at a system level.

Where We Are

- The project team have been working with all Trusts to put timelines in place for rollout.
- Work has involved setting up the right digital infrastructure and making sure all staff have access to the correct systems, finance teams working together to create a financial model that includes all appointment and drug costs, working through operational pathways via creation of SOPs and SLAs.
- Bolton will be the first Trust to transfer followed by Tameside, MRI and North Manchester
- Work is on-going with project teams at other Trusts to get all oncology capacity throughout GM transferred.

