

# RESPECT-21

Reorganising specialist cancer surgery for the 21st century: a mixed methods evaluation

PROJECT NEWSLETTER No. 14

January 2020

Welcome to our fourteenth RESPECT-21 newsletter

Highlights this quarter:

- **The National Cancer Registration and Analysis Service** data have arrived!
- We had a really productive **Study Steering Committee meeting** in November.
- We had a great meeting with the Policy and Information team of **Cancer Research UK** in October.
- **Meet the team:** Axel Bex, Clinical Lead of the Specialist Centre for Kidney Cancer, Royal Free Hospital

## PROGRESS UPDATE

We have received the 2017 National Cancer Registration and Analysis Service (NCRAS) data! Every year, NCRAS collects data on over 300,000 cases of cancer to support cancer epidemiology, public health, service monitoring and research. The data we have received will be used to analyse the impact of the changes on delivery of care, patient outcomes and value for money.

Our Qualitative researchers are making good progress on the comparison of the ways in which have been made in Greater Manchester and London.

## SHARING OUR FINDINGS



## Study Steering Committee

On 12 November 2019 our **Study Steering Committee (SSC)** met in person for the **third time**. This meeting brought together the study team with a group of patient representatives, clinicians, commissioners, and researchers to discuss study progress and interim findings, and plan the next steps of the research.

	<p>There were some interesting presentations from the team, which sparked useful discussions, including:</p> <ul style="list-style-type: none"> <li>- <b>London Cancer</b> (Prof Muntzer Mughal): update on the changes in the North Central and East London (NCEL) Cancer Alliance</li> <li>- <b>Greater Manchester Cancer</b> (Prof David Shackley): update on the centralisation of oesophago-gastric and urological cancer services.</li> <li>- <b>Renal Cancer Analysis</b> (by Dr Mariya Melynychuk): early analysis findings from the British Association of Urological Surgeons (BAUS) data</li> <li>- <b>Patient and Public Involvement</b> (Dr Georgia Black and Veronica Brinton): reflection on PPI in the study and the impact of centralisation on local workforce.</li> <li>- <b>Greater Manchester Cancer and London Cancer comparison</b> (Dr Angus Ramsay): cross-case analysis of the changes</li> <li>- <b>How to cost the implementation of major system change</b> (Dr Caroline Clarke)</li> </ul> <p>All the valuable feedback and points raised in this meeting will be taken forward by the team as they continue to work on the project.</p>
<p><b>Cancer Research UK meeting</b></p>	<p>We had a very interesting meeting with the Policy and Information team of Cancer Research UK (CRUK) in October 2019. We discussed work they are doing on the reorganisation of cancer services and we shared information about RESPECT-21. We also discussed potential future collaborations in relation to dissemination of our findings and future research.</p>
<p><b>MEET THE TEAM</b></p>	<p>We're delighted to welcome our new team member, <b>Dr Axel Bex</b>, Clinical Lead of the Specialist Centre for Kidney Cancer at the Royal Free.</p> <div data-bbox="331 1003 644 1357" data-label="Image"> </div> <p>I am a urologic surgeon and Clinical Lead of the Specialist Centre for Kidney Cancer at the Royal Free as well as an Honorary Associate Professor at UCL Division of Surgical and Interventional Science. I have previously worked as a genitourinary surgeon at the Netherlands Cancer Institute, Amsterdam, for 20 years. My main research focuses on the combination of surgery and systemic therapy in metastatic kidney cancer and neoadjuvant and adjuvant treatment in locally advanced disease and has made impact on clinical practice and kidney cancer guidelines.</p> <p><b>Tell us about your new role as a Consultant Clinical Lead at Specialist Centre for Kidney Cancer, Royal Free London NHS Foundation Trust.</b></p> <p>Together with the multidisciplinary team we discuss approximately 70-80 referrals each week and perform more than 400 renal surgeries – most of them for kidney or upper urinary tract cancer – annually. It is my role to oversee the service, ensure targets are met and facilitate development, education and research at the Specialist Centre for Kidney Cancer.</p> <p><b>What excites you the most about being in this role?</b></p> <p>Working in an environment in which the centralisation of kidney and upper urinary tract cancers has been realized offers tremendous opportunities for health care improvement, pathway developments, education and training and research.</p> <p><b>What are some of the challenges?</b></p> <p>Due to the high patient numbers proper registries for continued and comprehensive quality audits are required and we are currently working with the team on a realization of a platform to register all patients discussed at the MDT, their recommendations, treatments, adverse events and outcomes. This will hopefully allow us to audit our service and improve it through quality feedback.</p>

**How did you come to be involved with the RESPECT-21 Study?**

The Kidney Cancer service at the Royal Free was part of the RESPECT-21 study from its planning to its realisation. I was invited to join, it is important that clinicians are involved in the interpretation of the results.

**What have you enjoyed the most about being involved?**

I have been involved with very similar but preliminary questions in my previous position in the Netherlands but the actual execution of centralisation as well as a parallel scientific program such as the RESPECT-21 study to evaluate the impact of centralised care provides fascinating insights. I have enjoyed most to assess factors responsible for the changes in care being noticeable since the inception of the project.

**What do you think the impact of the study (and the reorganisations, in general) will be on patient care moving forward?**

Little is known about the true impact of centralisation of health care and processes are complex. Expertise is gained but also lost in places where patients will be referred. I hope that RESPECT-21 will be able to demonstrate that patient care improves, costs are saved and that the loss of expertise elsewhere can be mitigated.

**PROJECT SUMMARY**

North Central and North East London and West Essex (population 3.2 million) and Greater Manchester (population 3.1 million) have reduced the number of hospitals providing specialist surgery for a range of cancers.

We are using various methods to study changes in the way specialist cancer surgery services are organised and provided in London and Greater Manchester.

The RESPECT-21 research team are studying the proposed changes focusing on bladder and prostate, kidney and oesophago-gastric pathways.

We are studying:

- Preferences of cancer patients, healthcare professionals, and the public in relation to changes of this kind.
- Key processes of implementing the London and Greater Manchester changes.
- The impact of the changes on care processes and outcomes.
- The cost and cost-effectiveness of the changes.
- The impact of the changes on staff and patients.
- Finally, we will consider the implications for future changes of this kind.

**PROJECT PUBLICATIONS**

To date, we have published the following papers from our work:

**Fulop NJ, et al.** Reorganising specialist cancer surgery for the twenty-first century: a mixed methods evaluation (RESPECT-21). *Implementation Science* (2016) (Study protocol).

FREE DOWNLOAD:

<https://implementationscience.biomedcentral.com/articles/10.1186/s13012-016-0520-5>

**Vallejo-Torres L, et al.** Discrete choice experiment to analyse preferences for centralising specialist cancer surgery services. *British Journal of Surgery* (2018).

FREE DOWNLOAD: <http://onlinelibrary.wiley.com/doi/10.1002/bjs.10761/full>

We also have an at a glance summary of this paper, available from this link:

<http://www.research.mbs.ac.uk/hsrc/portals/0/docs/respect-21-at-a-glance.pdf>

	<p><b>Melnychuk, M, et al.</b> Centralising specialist cancer surgery services in England: survey of factors that matter to patients and carers and health professionals. <i>BioMed Central (BMC): Cancer</i> (2018).  FREE DOWNLOAD: <a href="https://bmccancer.biomedcentral.com/articles/10.1186/s12885-018-4137-8">https://bmccancer.biomedcentral.com/articles/10.1186/s12885-018-4137-8</a></p>
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<p><b>DISCLAIMER</b></p>	<p>The views and opinions expressed herein are those of the authors and do not necessarily reflect those of the Health Services and Delivery Research Programme, NIHR, NHS or the Department of Health and Social Care.</p>
<p><b>FIND OUT MORE</b></p>	<p>To find out more about RESPECT-21, or tell us what you'd like to see next time, please contact:</p> <ul style="list-style-type: none"> <li>✉ Prof Naomi Fulop, Chief Investigator <a href="mailto:n.fulop@ucl.ac.uk">n.fulop@ucl.ac.uk</a></li> <li>✉ Dr Angus Ramsay <a href="mailto:angus.ramsay@ucl.ac.uk">angus.ramsay@ucl.ac.uk</a></li> <li>✉ Pei Li Ng, Project Manager <a href="mailto:pei.ng@ucl.ac.uk">pei.ng@ucl.ac.uk</a></li> </ul> <p>Visit the RESPECT-21 project website for the latest news and links:  ① <a href="https://www.ihpo.manchester.ac.uk/research/projects/respect-21/">https://www.ihpo.manchester.ac.uk/research/projects/respect-21/</a></p> <p>Find out more about the service centralisations we are studying here:</p> <ul style="list-style-type: none"> <li>① London Cancer: <a href="http://www.uclh.nhs.uk/londoncancer">http://www.uclh.nhs.uk/londoncancer</a></li> <li>① Greater Manchester Cancer: <a href="https://gmcancer.org.uk/">https://gmcancer.org.uk/</a></li> </ul>
<p><b>NEXT NEWSLETTER: April 2020</b></p> <p>Please share this newsletter with anyone who you think would be interested in our work.</p> <p>If you would prefer not to receive these newsletters, please contact <a href="mailto:pei.ng@ucl.ac.uk">pei.ng@ucl.ac.uk</a> and we will be happy to remove your details.</p>	