

RESPECT-21

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

PROJECT NEWSLETTER No. 15

July 2020

Welcome to our RESPECT-21 newsletter

Highlights this quarter:

- **NEWLY PUBLISHED PAPER: The role of provider networks**
- **Q&A** with lead author **Dr Cecilia Vindrola-Padros** about writing the new paper.
- **Dr Caroline Clarke** presented *how to cost the implementation of major system change* at the **Health Services Research UK conference 2020!**
- **UPCOMING:** We are planning a **Virtual Workshop** to present our findings to take place in January 2021, more info coming soon! Please contact us if you are interested in attending.

**NEW PAPER
OUT NOW:**

What is the role of provider networks in implementing major system change in specialist cancer surgery?

We are delighted to let you know that we have published a **new paper!**

The paper is entitled "***Implementing major system change in specialist cancer surgery: The role of provider networks***", it examines the role that networks can play in leading and implementing major system change, using the case of centralisation of specialist cancer surgery in London.

You can download the paper for free from this link:

<https://journals.sagepub.com/doi/10.1177/1355819620926553>

We also have a 2 page at a glance summary of this paper, available from this link:

<http://documents.manchester.ac.uk/display.aspx?DocID=50191>

Below, we have an interview with the lead author, Dr Cecilia Vindrola-Padros, in which you can learn more about the paper and what it means.

Q&A with Dr Cecilia Vindrola-Padros about the role of provider in networks paper



We caught up with lead author **Dr Cecilia Vindrola-Padros** to ask her about her experience writing the newly published paper – ***The role of provider networks***.

What is this paper about, and how did you come to write it?

As we were collecting data for the study, we started to understand the role of the network of healthcare provider organisations that implemented the centralisation of cancer surgery in London and felt this was a unique experience that needed to be analysed and disseminated. We were interested in seeing how the analysis of this particular case could make contributions to the wider literature on major system change.

What was your favourite part of writing this paper?

The discussions with the research team and our clinical colleagues. I think these really enriched the paper and helped with the writing process.

Which groups of people do you think will find this paper useful?

I think it will be useful for those interested in designing and implementing major system change in a wide range of healthcare contexts as well as for health services researchers and patient groups. We tried to make sure we reflected the views of these three groups in our analysis to make sure the findings would be relevant for a wide audience.

What are the key messages that these groups will take away?

The proposed changes were met with resistance by some clinicians and patients who did not agree with the rationale behind making the changes or the processes used to implement them. The implementation of these changes was based on the engagement of a wide range of stakeholders across the network and the distribution of leadership roles in different healthcare organisations. A core team of network leaders, managers and clinicians (with combined clinical and managerial roles), facilitated the implementation of the centralisation of cancer surgery. A certain degree of continuity of central leadership figures needed to be maintained to ensure the changes were implemented on time.

How might they use these lessons to improve practice/quality?

I think the findings can point to a series of factors that need to be taken into consideration when planning changes of this sort, such as: the importance of the continuity of leadership and its distribution over different organisations and areas of the network, the need for facilitation roles for network managers and clinicians with clinical/managerial roles, the potential resistance to the changes by staff and patients and the value of including all relevant stakeholders during early stages of planning and design to promote engagement during implementation.

Health Services Research (HSR) UK Conference

Our Health Economics researcher **Dr Caroline Clarke** presented her findings on *How to cost the implementation of major system change: case study using reconfigurations of specialist cancer surgery in part of London, UK* at the **HSR UK Conference 2020**.

[CLICK TO WATCH THE PRESENTATION](#)



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.

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| | <ul style="list-style-type: none"> • 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. |
| <p>PROJECT PUBLICATIONS</p> | <p>To date, we have published the following papers from our work:</p> <p>Fulop NJ, et al. Reorganising specialist cancer surgery for the twenty-first century: a mixed methods evaluation (RESPECT-21). <i>Implementation Science</i> (2016) (Study protocol). FREE DOWNLOAD: https://implementationscience.biomedcentral.com/articles/10.1186/s13012-016-0520-5</p> <p>Vallejo-Torres L, et al. Discrete choice experiment to analyse preferences for centralising specialist cancer surgery services. <i>British Journal of Surgery</i> (2018). FREE DOWNLOAD: http://onlinelibrary.wiley.com/doi/10.1002/bjs.10761/full</p> <p>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> <p>Melnychuk, M, et al. Centralising specialist cancer surgery services in England: survey of factors that matter to patients and carers and health professionals. <i>BioMed Central</i> (BMC): Cancer (2018). FREE DOWNLOAD: https://bmccancer.biomedcentral.com/articles/10.1186/s12885-018-4137-8</p> <p>Vindrola-Padros, C, et al. Implementing major system change in specialist cancer surgery: The role of provider networks. <i>Journal of Health Services Research & Policy</i> (2020). FREE DOWNLOAD: https://journals.sagepub.com/doi/10.1177/1355819620926553</p> |
| <p>FUNDING</p> | <p>This project is funded by the National Institute for Health Research Health Services and Delivery Research Programme (NIHR HS&DR; project number 14/46/19).</p> |
| <p>DISCLAIMER</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>FIND OUT MORE</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"> ✉ Prof Naomi Fulop, Chief Investigator n.fulop@ucl.ac.uk ✉ Dr Angus Ramsay angus.ramsay@ucl.ac.uk ✉ Pei Li Ng, Project Manager pei.ng@ucl.ac.uk <p>Visit the RESPECT-21 project website for the latest news and links: ① https://www.ihpo.manchester.ac.uk/research/projects/respect-21/</p> <p>Find out more about the service centralisations we are studying here: ① London Cancer: http://www.uclh.nhs.uk/londoncancer ① Greater Manchester Cancer: https://gmcancer.org.uk/</p> |
| <p style="text-align: center;">NEXT NEWSLETTER: November 2020</p> <p style="text-align: center;">Please share this newsletter with anyone who you think would be interested in our work.</p> <p style="text-align: center;">If you would prefer not to receive these newsletters, please contact pei.ng@ucl.ac.uk and we will be happy to remove your details.</p> | |