

Evaluation of the NHS National Cancer Vanguard

Executive Summary of the Year 1 report

29 June 2018

Evaluation purpose

The purpose of this evaluation is to answer the overarching question, *'What has been the impact of the National Cancer Vanguard on cancer outcomes and patient experience; what value has been delivered across all three Vanguard Partners. Can this be replicated?'* It aims to identify the 'active ingredients' of the programme; at a national level, a Vanguard partner level and a project level that, if replicated elsewhere, can be expected to give similar results. The purpose of this evaluation is not to determine a 'one size fits all' model of care for cancer but rather to identify opportunities to learn across the Vanguard and spread the learning nationally amongst the Cancer Alliances.

Methods

A formative (focusing on process and implementation) and summative (focusing on outputs, outcomes and impact) evaluation approach has been taken using mixed methods of data collection and analysis. This report focuses on the findings of year 1 of the three-year evaluation and the primary focus on this evaluation has been on the process of the NCV programme to identify the key conditions for success that can be replicated by other Cancer Alliances.

Findings

The National Cancer Vanguard programme provided access to the following resources and inputs, tangible and intangible, that would otherwise have not been available:

- Funding over the two-year period to resource the National Cancer Vanguard Programme and the programmes being delivered locally;
- A national governance and programme management framework that enabled access to the New Care Models team as a resource to support implementation and the National Cancer Transformation Programme to influence strategy implementation;
- Permission to act that was granted by the national profile and legitimacy of the wider Vanguard brand;
- Opportunity to innovate in models of care with partners (e.g. charities, pharmaceutical and industry partners), monitor and evaluate benefits delivered systematically and then share this learning so that the models can be replicated by other Cancer Alliances;
- Development of a Pan-Vanguard Informatics Service that delivered locally bespoke solutions within a shared methodological framework that has become a blueprint for the set-up of the national Cancer Alliance Data Evidence and Analytics Service.

The following key local (partner-level) conditions for success have been identified:

- Strong local leadership for cancer transformation at programme level and across the wider local system (e.g. Sustainability and Transformation Partnerships) with a shared sense of purpose for delivering on the National Cancer Strategy;
- High-performing teams of project and change managers recruited and retained within the programme over time who take a collaborative approach to supporting clinical and other change and establish a clear framework for tracking benefits realisation;

- Openness to collaborate across organisational boundaries from all stakeholders involved in the programme;
- A climate of research collaboration and historical investment in cancer research creates the conditions for innovation and learning, and collaborations with and through Academic Health Science Networks are well established in all three partners within the National Cancer Vanguard;
- A strong network of collaboration with cancer charities was considered an essential condition for the success of specific programmes of work and in the governance of the partner-level programmes; and
- Engagement with patients and patient representatives in programme governance, project design and project delivery.

Conclusions

The early findings of this evaluation demonstrate that the NCV Programme has supported the accelerated progress of innovations and new care models in the three cancer systems by providing:

1. A shared sense of purpose among key stakeholders (including providers, commissioners, Sustainability and transformation Partnerships, charities and Academic Health Science Networks (AHSNs) on improving the local cancer system, delivering on the National Cancer Strategy and focusing on the needs of people living with the effects of cancer;
2. The opportunity and 'permission' to develop governance structures for cancer system innovation, embedded within the local cancer service delivery context that promotes openness to working across organisational boundaries;
3. Funding to resource two years of support to the transformation programme with high-performing teams or project and change managers which has enabled the Vanguard partners to 'make the case' for continued support to priority programmes within their system;
4. As part of the national Vanguard programme, supporting and encouraging culture that promotes innovation, learning from failure as well as success and collaboration through open communication channels (formal or informal) and regular discussion / information exchange;
5. An informatics service that provides pan-Vanguard as well as locally relevant information and analysis to inform real-time decision-making.
6. The opportunity to innovate in models of care with Pharma and Industry partners;

Other Cancer Alliances should consider the maturity of the own cancer system against these characteristics as they develop their local new models of cancer care.

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