

## **Equipment Investment Strategy**

**A guide to Big C's strategy for investment in  
equipment, staff and facilities  
in support of cancer diagnosis and treatment**

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## 1. Introduction to Big C

Big C is a local, proudly independent, cancer charity formed in 1980 by two young men, one of whom remains a trustee. Having had to travel to London for their own cancer treatment they were determined that people in Norfolk & Waveney should have access to the very best treatment and care locally. That dedication is shared today by everyone connected with Big C. With the help of the local community the charity has raised more than £14 million since its foundation. All the funds Big C spends are used to benefit local people; either by providing money for care and treatment; or by funding internationally acclaimed research through local investment in significant project and equipment grants.

## 2. Big C's objectives

Big C's vision is to enable Norfolk & Waveney to be a centre of excellence for the provision of cancer services, and to contribute to the international reputation for excellence in cancer research locally.

Big C has four core objectives which we will develop over the next five years.

- Equipment** To fund equipment, staff and facilities in support of cancer diagnosis and treatment.
- Support** To develop information and support services for adults, children and their families affected by cancer.
- Care** To develop the best possible care for those whose cancer diagnosis offers no long term cure.
- Research** To promote the development of world class cancer research locally.

In the first of these areas, our investment strategy has been focussed on the investment of equipment, facilities and staff to facilitate diagnosis and treatment across Primary Care and the three Acute Trusts (Norfolk and Norwich University Hospital, James Paget University Hospital and the Queen Elizabeth Hospital at Kings Lynn).

Since the charity's inception we have approved around a 100 clinical grants with a total amount awarded of nearly £5million spread mainly across primary care and acute trusts.

Big C intends that any investment must be targeted where it is most beneficial and will not limit this to any organisation. Working with the Anglia Cancer Network (ACN) and those groups and stakeholders who work within it, Big C will try to establish what the priorities are and fund appropriately to improve diagnosis and treatment facilities for the people of Norfolk & Waveney. Once developed details of these will be available on our website, however the overall context is set out below.

## 3. National and regional perspective

A number of very important changes will affect the way that Big C looks at approving and providing equipment grants including the new national Cancer Reform Strategy and emerging regional changes in the structure of the networks in response to this.

**3.1 The Cancer Reform Strategy** sets the direction for cancer services for the next five years building on the NHS cancer plan published in 2000.

With regard to clinical support the Plan sets out to improve access to screening to facilitate early diagnosis and improve poor survival rates in this country due to late diagnosis.

Improvement and expansion of screening programmes for cervical, bowel and breast cancer, plans to reduce the variation of coverage between the Primary Care Trusts (PCTs), and consideration of use of new technology as and when research supports this are mentioned as ways of improvement.

A national audit to determine how best to provide more support to primary care professionals to ensure the early diagnosis of cancer, will also be used to understand more about the nature and extent of delays in diagnosis.

The plan also highlights the need for fast access to high quality treatment at every stage of the journey with more patients covered by existing waiting time standards and hopes to reduce waiting times to as many patients as possible for all forms of treatment.

Two key principles to improve service models for cancer are, first that care should be delivered locally wherever possible to maximise patient convenience and second, that services should be centralised where necessary to improve outcomes.

In all cases, care provided must conform to national standards such as Improving Outcomes Guidance (IOG) and must be fully integrated with other services within the Cancer Network. This will obviously provide some strong emphasis for Big C to look to approve grants in line with national agenda.

**3.2** The Cancer Reform Strategy also has implications for the regional networks and how they can more effectively support and influence the PCTs in commissioning services. **The Anglia Cancer Network** (ACN) has replaced the former Norfolk & Waveney and West Anglia Cancer Networks and also the Ipswich locality of the former Mid Anglia Cancer Network. This network is a governed partnership between PCTs and hospital trusts overseeing the development of cancer services for a population of 2.4 million across Norfolk, Suffolk, Great Yarmouth and Waveney, Bedfordshire, Cambridgeshire and Peterborough. The network will work with hospitals to ensure they meet the exacting standards laid down for Cancer Services in the national plan.

Provider Development, Patient and Public Involvement groups and the 12 Site Specific Groups (SSGs) - divided into Lung, Gynaecology, Breast, Upper Gastro Intestinal, Urology, Haematology, Colorectal, Head & Neck, Children and Young Adults, Skin, Sarcoma and Brain - input into the ACN and should help to provide a representative view in order for the board to:

- Co ordinate network policy and ensure consistency for commissioning and service provision
- Facilitate strategic partnerships required to underpin effective cancer services and commissioning
- Monitor performance against national targets
- Act as a broker for agreeing pathways which feed into local delivery plans
- Develop effective SSGs ensuring they are effectively led and supported

#### **4. The Role of Big C in Norfolk & Waveney**

The first of Big C's four core objectives is to fund equipment, staff and facilities in support of cancer diagnosis and treatment in Norfolk & Waveney. Big C will work with relevant health care providers, patients and statutory commissioners to identify local investment priorities and ensure that any equipment is sustainable, fully utilised, and that it underpins existing provision.

The Norfolk & Waveney area is covered by the two newly formed Primary Care Trusts:

- Norfolk (previously divided into Broadland, Norwich North, South and West Norfolk)

- Great Yarmouth and Waveney

Norfolk & Waveney has three acute hospital sites:

- Norfolk & Norwich University Hospital,
- James Paget University Hospital at Great Yarmouth
- Queen Elizabeth Hospital at Kings Lynn,

As statutory pathways develop Big C will work in conjunction with the appropriate groups (where relevant) being:

- Site Specific Groups
- Anglia Cancer Network
- Primary Care Trusts
- Patient Representatives
- Primary Care Providers
- Acute Trusts

This will be key in helping Big C gain a representative understanding of the priorities within the area which have Stakeholder approval.

## 5. What kind of equipment support will we fund?

Big C will give consideration to any project confirmed as a priority for Norfolk & Waveney with appropriate approvals, which would be most beneficial to local people.

- Equipment

Big C will support the capital cost (or a proportion of the cost) of equipment purchases, subject to revenue costs being funded by the beneficiary trust. Big C will not support requests for funding to replace equipment already funded by the charity. In establishing priorities for investment Big C will have regard to the number of patients who will benefit each year and the percentage of the use of a piece of equipment which is directly related to cancer (partial funding will be considered if this is less than 100%).

- Staff

Big C will consider funding medical staff, nursing staff, and professionals allied to medicine (PAMS). Our role will ordinarily be to provide pump priming, subject to a guarantee that any post will continue to be supported in perpetuity by the beneficiary after the first year. Funding for site specific staff posts will not ordinarily be supported by Big C, nor will funding of the professional development of staff.

- Facilities

Big C is keen to support projects which improve the clinical services offered to local people and will consider investment in facilities or services.

- Other

Big C does not wish to be entirely prescriptive about the type of project it will support and will therefore consider investment in projects which do not fit into any of the above categories.

Funding is not limited to a particular organisation and applications may come from primary care or secondary care providers, be they statutory sector or not for profit. However in all cases it must meet IOG requirements in line with the new Cancer Reform Strategy.

Big C aims to provide additional services which will enhance statutory provision, which will enhance the patient diagnostic and treatment pathway in Norfolk & Waveney.

## **6. Shared vision and local priorities**

Big C will work closely with local partners to ensure that there is strategic fit between Big C funding and other sources of funding. Big C would like to work towards a shared vision with local partners by:-

- 1) Being reactive to local need
- 2) Working with key stakeholders to identify and develop local investment priorities over the longer term.

## **7. The Equipment Investment Programme**

Big C will operate two award "rounds" annually, with application deadlines of 31 March and 30 September. Applications will be subject to an initial desk top review in order to establish that application criteria have been met and will then be submitted for review by our Equipment Funding Panel (a panel made up of clinicians and Big C Trustees with relevant expertise and experience from across Norfolk & Waveney).

The views of the following bodies will be taken into consideration as part of the Grants approval process:

- Site Specific Group/s
- Anglia Cancer Network
- Primary Care Trusts
- Patient representatives

The Panel then makes recommendations to Big C's Grants Committee (to be considered alongside the recommendations of the Research Funding Panel). The Grants Committee then makes its final recommendations to the Board of Trustees.

Big C will provide written feedback where possible to unsuccessful applicants but will not enter into any discussion or debate on views expressed therein or the decision of the Trustees which is final.

## **8. How much funding is available?**

Over the last 2 years Big C has invested over half a million pounds in local equipment, staff and facilities. Big C's financial plan for the next three years aims to increase our annual income from £1m to £2m by 2011. A proportion will be allocated to equipment grants. This will be reviewed bi annually by the Trustees prior to the two grants rounds who will take into account the need to balance Big C's investment in equipment with the charity's other strategic objectives.

Details of past awards are contained in the charity's annual accounts and will also be published on the website.

## **9. Openness and accountability**

Big C can only continue to be successful with the generous support of the people of Norfolk & Waveney.

We are committed to communicating the results of our investment to our supporters in order that they can share in our vital work. Big C intends to operate in an open and accountable way and will demonstrate this by:

- Publishing this strategy on our website
- Annual publication of results of grants programme
- Working with recipients of grants to monitor the impact of funding and reporting on measurable outcomes. Please see guidance.

## **10. Consultation and review**

This strategy was devised in consultation with key potential grant beneficiaries and with regard to the Cancer Reform Strategy.

We have also engaged those who would wish to help raise additional funds in support of the Big Equipment Investment Strategy.

The strategy will be reviewed on an ongoing basis and will be discussed as a standing order at each grant allocation round.

## **11. References**

*Cancer Reform Strategy* - Department of Health, December 2007