

Policy document/web link	Author/led by	Relevant UK nation and date published	Overview of document	Specific reference to nursing
NICE Clinical Guideline 81 - Advanced breast cancer: Diagnosis and treatment https://www.nice.org.uk/guidance/cg81	National Institute for Health and Care Excellence (NICE)	England, 2009 (last updated 2017)	The advice in the NICE guideline describes the tests, treatment, care and support that patients with advanced breast cancer should be offered.	Section 1.4 – Supportive care, includes recommendations around assessing patients’ needs at key points, plus the nomination of a ‘key worker’ to provide continuity of care.
Quality Standard for breast cancer https://www.nice.org.uk/guidance/qs12	National Institute for Health and Care Excellence (NICE)	England, 2011 (last updated 2016)	Contains 6 statements covering different aspects of diagnosis and treatment. Statements 5 and 6 are relevant to secondary breast cancer.	Statement 6: ‘People with locally advanced, metastatic or distant recurrent breast cancer are assigned a key worker’
3 rd ESO-ESMO International Consensus Guidelines for Advanced Breast Cancer <i>The Breast</i> http://dx.doi.org/10.1016/j.breast.2016.10.001 <i>Annals of Oncology</i> http://dx.doi.org/10.1093/annonc/mdw544	European School of Oncology (ESO) and European School of Medical Oncology (ESMO)	England, Scotland and Wales, 2016	The European School of Oncology created an Advanced Breast Cancer (ABC) Taskforce in 2005 due to a lack of international consensus on managing this patient group. This led to the first international consensus guidelines conference on advanced breast cancer in Nov 2011. The 2016 Guideline is the 3 rd and latest version. They are intended to be management recommendations that can be applied internationally, albeit	General statement – specialised oncology nurses (if possible specialised breast nurses) should be part of the multidisciplinary team

			with the necessary adjustments for each country.	
<p>One year on: the government response to the review of choice in end of life care</p> <p>https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/645631/Government_response_choice_in_end_of_life_care.pdf</p>	Department of Health and Social Care	England, 2017		
<p>Achieving world-class outcomes: A strategy for England 2015-2020</p> <p>http://www.canceresearchuk.org/sites/default/files/achieving_world-class_cancer_outcomes_-_a_strategy_for_england_2015-2020.pdf</p>	The Independent Cancer Taskforce	England, 2015	<p>Pan-cancer document.</p> <p>The England cancer strategy. Sets out ambitions for improving cancer outcomes in England up to 2020.</p>	<p>Recommendation 46: 'The Trust Development Authority, Monitor and NHS England should encourage MDTs to consider appropriate pathways of care for metastatic cancer patients. Clinical Reference Groups will need to play a key role in supporting these MDTs.'</p> <p>Recommendation 61: 'NHS England and the Trust Development Authority should encourage providers to ensure that all patients have access to a CNS or other key worker from diagnosis onwards, to guide them through treatment options and ensure they receive appropriate information and</p>

				<p>support. In parallel, NHS England and Health Education England should encourage providers to work with Macmillan Cancer Support and other charities to develop and evaluate the role of support workers in enabling more patient centred care to be provided.'</p> <p>Palliative care recommendations:</p> <p>Recommendation 49: NHS England should pilot, through new or existing vanguard sites, assessment of holistic needs for cancer patients at the point of diagnosis, evaluating the benefit of earlier palliative care and/or intervention from AHPs.</p> <p>Recommendation 75: NHS England should ensure that CCGs commission appropriate integrated services for palliative and end of life care, in line with the NICE Quality Standard (2011). They should take into account the independent Choice Review and the forthcoming Ambitions for End of Life Care, working with Health and Wellbeing Boards. They should consider the role of the 'Gold Standards Framework' within their delegated powers for commissioning of primary care. CQC should incorporate end-of-life care into its assessment metrics for</p>
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				hospitals and other providers of cancer services.
<p>Clinical Advice to Cancer Alliances for the Provision of Breast Cancer Services</p> <p>https://www.breastcancercare.org.uk/sites/default/files/clinical_advice_for_the_provision_of_breast_cancer_services_aug_2017.pdf</p>	The Breast Cancer Clinical Expert Group	England, 2017		5.2.52 'It is particularly important that all patients with recurrent or metastatic breast cancer have access to a clinical nurse specialist with specialist knowledge of secondary disease. They should be available to give information and psychological support to patients and their families.'
<p>Beating Cancer: Ambition and Action</p> <p>http://www.gov.scot/Resource/0049/00496709.pdf</p>	The Scottish Government	Scotland, 2016	<p>Pan-cancer document.</p> <p>The Scottish Government's cancer strategy.</p>	<p>Workforce section:</p> <p>Ambition for 'all people with cancer, who need it, have access to a specialist nurse during and after their treatment.'</p> <p>Action – 'We will put the necessary levels of training in place to ensure that by 2021 people with cancer who need it have access to a specialist nurse during and after their treatment and care'</p> <p>Living with, and beyond, cancer section:</p> <p>Ambition – 'To ensure that, by 2021, everyone in Scotland who needs palliative care will have access to it.'</p>

				Action – ‘We will invest £3.5 million over 4 years to drive improvements across the palliative care sector and to support targeted action on training and education that support the aims of the Framework.’
<p>Management of Breast Cancer Services Standards</p> <p>http://www.healthcareimprovementscotland.org/his/idoc.ashx?docid=ae658edb-90eb-4ea1-9b03-1970507da3d2&version=-1</p>	<p>Healthcare Improvement Scotland</p>	<p>Scotland, 2008</p>	<p>Contains clinical standards for breast cancer services. Specific to secondary breast cancer, p.11:</p> <p>‘There is discussion of patients with new recurrence or metastatic disease by the core breast cancer MDT.’</p>	<p>Patients with a suspected or known diagnosis of metastatic breast cancer have access to a named breast CNS, or alternative in rural units, for information and support throughout treatment.</p>
<p>Scottish Palliative Care Guidelines</p> <p>http://www.palliativecareguidelines.scot.nhs.uk/</p>	<p>Produced by a multidisciplinary group of professionals working in the community, hospital and palliative care services throughout Scotland.</p> <p>The guidelines are supported by Healthcare</p>	<p>Scotland, 2014 (regularly reviewed and updated)</p>	<p>The guidelines reflect a consensus of opinion about good practice in the management of people with a life limiting illness.</p>	

	Improvement Scotland and the Scottish Partnership for Palliative Care			
Living and Dying Well: Building on Progress http://www.gov.scot/Resource/Doc/340076/0112559.pdf	The Scottish Government	Scotland, 2011	Records the progress which has been made towards achieving the aims of the 2011 national action plan for palliative and end of life care in Scotland – ‘Living and Dying Well’ and sets out the next phase of actions required by NHS Boards working with stakeholders.	
Cancer Delivery Plan for Wales 2016-2020 https://gov.wales/docs/dhss/publications/161114cancerplanen.pdf	The Wales Cancer Network, Welsh Government	Wales, 2016	Pan-cancer document. The Welsh Government’s cancer strategy. Sets out the Welsh Government’s plans to deliver the ‘best possible care and support to everyone affected by cancer’.	Highlights the importance of a named key worker to help the patient navigate the complex cancer pathway. States that this key worker is usually the clinical nurse specialist.
National Standards for Breast Cancer Services http://www.wales.nhs.uk/sites3/Documents/322/National_Standards_for_Br	NHS Wales, Welsh Assembly Government	Wales, 2005	Cancer Standards define the core aspects of the service that should be provided for cancer patients throughout Wales. Standards on palliative care p.33	

<p>east_Cancer_Services_2005_English.pdf</p>				
<p>National Standards for Rehabilitation of Adult Cancer Patients</p> <p>http://www.wales.nhs.uk/sites3/Documents/322/National_Standards_for_Rehabilitation_of_Adult_Cancer_Patients_2010.pdf</p>	<p>NHS Wales, Welsh Assembly Government</p>	<p>Wales, 2010</p>	<p>Cancer Standards define the core aspects of the service that should be provided for cancer patients throughout Wales.</p> <p>These Standards inform the development of site specific rehabilitation pathways.</p> <p>The Standards describe the importance of rehabilitation in all phases in cancer care, including for those living with cancer and for end of life care</p>	<p>Page 16: Recommends that patients should be allocated an experienced key worker or navigator, who is the most appropriate health or social care professional for the patient's stage along the cancer continuum.</p>
<p>Improving Supportive and Palliative Care for Adults with Cancer</p> <p>https://www.nice.org.uk/guidance/csg4/resources/improving-supportive-and-palliative-care-for-adults-with-cancer-pdf-773375005</p>	<p>NICE, 2004</p>	<p>England and Wales, 2004</p>	<p>The guidelines advises those who develop and deliver cancer services for adults with cancer about what is needed to make sure that patients, and their families and carers, are well informed, cared for and supported.</p>	<p>Suggests that teams may wish to nominate (with the patient's agreement) a person to act as their 'key worker'.</p>

<p>National Standards for Specialist Palliative Care Cancer Services</p> <p>http://www.wales.nhs.uk/sites3/documents/322/National_Standards_for_Specialist_Palliative_Care_for_Cancer_2005_English.pdf</p>	<p>NHS Wales, Welsh Assembly Government</p>	<p>Wales, 2005</p>	<p>Cancer Standards define the core aspects of the service that should be provided for cancer patients throughout Wales.</p>	
<p>Secondary. Not Second Rate. Secondary breast cancer part three: support and impact</p> <p>https://www.breastcancercare.org.uk/sites/default/files/bc_report_3_2017_final.pdf</p>	<p>Breast Cancer Care</p>	<p>England, Scotland and Wales, 2017</p>	<p>This report highlights the ongoing support needs and difficulties faced by people with secondary breast cancer throughout their treatment and as their cancer changes.</p>	<p>P.14 Recommends that hospitals should establish or maintain a dedicated MDT for secondary breast cancer patients, or at the very least, a specific section in an existing MDT meeting for secondary breast cancer patients to be routinely discussed.</p> <p>P.14 Recommends that a key worker should be identified for the patient who will be responsible for the coordination of care.</p>
<p>Secondary. Not Second Rate. Secondary breast cancer part four: Nursing care</p> <p>https://www.breastcancercare.org.uk/</p>	<p>Breast Cancer Care</p>	<p>England, Scotland and Wales, 2017</p>	<p>This report highlights the issues faced by breast care teams and patients across the UK: that patients with secondary breast cancer do not always have access to specialist nursing that may improve their quality of life</p>	

<p>sites/default/files/secondary-nursing-report.pdf</p>			<p>and emotional wellbeing from the point of diagnosis.</p> <p>The report highlights the importance of specialist nursing for patients with secondary breast cancer, and makes recommendations for improving nursing provision for those living with secondary breast cancer.</p>	
<p>Secondary. Not Second Rate. The case for change</p> <p>https://www.breastcancercare.org.uk/sites/default/files/cool085_the_case_for_change_report_final.pdf</p>	<p>Breast Cancer Care</p>	<p>England, Scotland and Wales, 2017</p>	<p>This document summarises the findings and recommendations from Breast Cancer Care's Secondary. Not Second Rate campaign.</p>	<p>Includes findings and recommendations relating to secondary breast cancer nursing provision.</p>
<p>Secondary. Not Second Rate. Setting the standard for care: current best practice in secondary breast cancer</p> <p>https://www.breastcancercare.org.uk/sites/default/files/pubs177_secondary_best_practice_report_2018_final.pdf</p>	<p>Breast Cancer Care</p>	<p>England, Scotland and Wales, 2018</p>	<p>This report outlines current best practice in secondary breast cancer care.</p>	<p>Includes examples of best practice in support and nursing care</p>

Items removed from the tables/replaced with updates

UK guidance document: treatment of metastatic breast cancer (2012) – no link to full text available

End of Life Care Strategy - promoting high quality care for all adults at the end of life (2008) – Out of date. Replaced with One year on: the government response to the review of choice in end of life care (in the table above)

Quality in Nursing Excellence in Cancer Care: The Contribution of the Clinical Nurse Specialist (2010) – no more recent version. Was published in 2010, so before the changes to the health system in England (so context is out of date).

SIGN's Management of breast cancer in women. A national clinical guideline 84 – no longer exists. There is only a primary specific one.

Better Cancer Care, an Action Plan – superseded by the new cancer strategy in Scotland

National Cancer Survivorship Initiative Vision Document www.ncsi.org.uk/wp-content/uploads/NCSIVision-Document.Pdf – no longer exists

Active and Advanced Disease (NCSI) www.ncsi.org.uk/what-we-are-doing/activeadvanced-disease – no longer exists