### Newsletter June 2019



Cancer is one of the key programmes of work within the Healthier Lancashire and South Cumbria Integrated Care System (ICS).

#### **Cancer Alliance Core Team:**

Prof. Damian Riley: Chair
Jane McNicholas: Clinical Director
Juliette Brookfield: Programme Director
Anne Tomlinson: Lead Nurse
Dr Neil Smith: Lead GP
Lisa Flanagan: Project Manager
Joanna Marshall: Project Manager
Scott Alker: Project Manager
Andrea Doherty: Workforce Lead
Claire Ainsworth: Data Analyst
Jason Gladwin: Data Analyst
Kira Pennington: Project Manager
Anne Turner: Project Manager
Margaret Nightingale: Business Suppor
Susan Booth: Business Support
Carol Wagstaff: Business Support

Welcome to our first Cancer Alliance Newsletter. It's been a busy few months but we thought it was worth taking a little time to keep you all up to date with our achievements so far and to highlight the collaboration with our clinical, third sector and patient partners who are central to the success of our work.

We have strengthened our links with the Healthier Lancashire and South Cumbria Integrated Care System (ICS) and are working closely with them to deliver the cancer agenda.

Our team has expanded and we are beginning to see results from many of our Projects. We compare well against our neighbouring Alliances and have show cased our work at various national events.

**Cancer Alliances** were set up to assist the NHS to deliver 'world class cancer outcomes' as defined by the Independent Cancer Taskforce. Our Alliance was created at the end of 2016.

The Lancashire and South Cumbria Cancer Alliance serves 1.7 million people over four I Geographical Localities - East Lancashire, Central Lancashire, Blackpool, Fylde & Wyre, and Morecambe Bay and is an integral member of the Healthier Lancashire Integrated Care System

We hope you enjoy reading our newsletter.

Juliette Brookfield.

**Cancer Waiting Times:** Possibly the most challenging area of our work to date is to consistently achieve the 62day target, however, significant progress is being made and again we are performing well against other Alliances.



### **Headlines from our Pathway work**

#### **Prostate:**

A national optimal pathway was released recommending that patients should have a mpMRI prior to a biopsy test\*. Over recent months, service improvement changes have taken place within our Urology and Radiology departments and now all our four Providers successfully achieved this change. \* to help diagnose prostate cancer

### **Upper GI**

A national optimal pathway has just been released and the Alliance continues to work collaboratively with colleagues to review how services are delivered. The Alliance has provided funding for a pilot study to establish 'pre-habilitation' for upper GI patients who need surgery. Pre-habilitation aims to improve a patient's health at the time of their operation and also during their recovery period and involves advice from dieticians and physiotherapists.

### Lung– Molecular testing

Using funding from the national cancer team, the Cancer Alliance has facilitated the establishment of a PDL1 test facility on our Blackpool Victoria Hospital site. Previously, lung biopsy specimens for patients needing this test had to be sent away to a laboratory in Birmingham. By providing this service within our Alliance footprint, the turn around time has been reduced from an average of 13 days to 2-3 days. This is a major reduction in the lung cancer pathway and a significant improvement in the patient experience due to reduced patient anxiety waiting for a test from a GP referral for suspected cancer

### **Colorectal:**

The Cancer Alliance has supported the introduction of 'point of care' testing for all radiology units to enable a finger prick blood test to check patients kidney function prior to having a CT scan. Newly diagnosed cancer patients, as well as those who undergo annual surveillance, will benefit as it will help to prevent cancellations if a recent blood result is unavailable, reducing anxiety and delays in the pathway.

The Government's long term plan focusses on getting cancer diagnosed at an earlier stage and the demand on diagnostic services such as endoscopy is increasing. The Alliance has invested in expanding the endoscopy workforce and is supporting the development of services so that patients will be able to go 'straight to test" from a GP referral for suspected cancer.

# Living with and Beyond Cancer: Highlights

### Supported Self-Managed Follow up:

As per national guidelines we are on target for delivering this new model of follow up by March 2020 for breast, colorectal and prostate patients who do not have active disease post treatment.

We have appointed Clinical leads to all three tumour groups, funded Cancer Care Coordinators and commissioned a digital remote surveillance system in conjunction with the ICS to ensure safety and efficiency.



We continue to embed the use of HNA'S and Care Plans and are working towards the introduction of Alliance wide Treatment Summaries.

We have extended funding to support the **Wellbeing** and Employment Service, hosted by Lancashire County Council and are currently conducting an evaluation of this service to date.

**Personalised Care :** the 'Living with and Beyond' remit is being expanded by the National Team to cover the pathway from the point of diagnosis onwards. This is in line with the other ICS diseases work streams and will provide a more holistic service for cancer patients in Lancashire and South Cumbria.

# Targeted Lung Health Checks:





Both Blackburn with Darwen and Blackpool CCGs have been selected to take part in the national pilot roll out of the Lung Health Check Programme.

The NHS Long Term Plan (January 2019) includes a new ambition to diagnose 3 out of 4 people with cancer at an earlier stage by 2028. To help deliver on this ambition the Plan committed to the roll out of targeted lung health checks across England.

Lisa Flanagan has recently been appointed as the Programme Manager and Dr John Howells has been appointed as the Clinical Director. Further appointments are being made to establish a core team to support the roll out over the next 4 years.

Lisa can be contacted on:

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### **Treatment and Care:**

**Radiotherapy Service Guidance:** Lancashire Teaching Hospital, The Christie and Clatterbridge Cancer Centres have come together to form one of the eleven Radiotherapy Operational Delivery Networks across the UK. Each Network is tasked with providing radiotherapy system leadership and the delivery of NHS England's vision and ambitions for the modernisation of radiotherapy services.

The Alliance have supported LTH in the acquisition of a new treatment planning system *RayStation,* to enhance communication between the above three Centres.





**Prevention and Early Diagnosis:** 

### **HIGHLIGHTS:** During the last 12 months, this project group has co-ordinated:

- **FIT (Faecal Immunochemical Testing):** A test Used to detect early bowel cancer; Now available for all GPs and patients across the Lancashire & South Cumbria Alliance.
- Implementation of an **Electronic Bowel Screening Alert** which is contributing to increasing bowel screening uptake.
- Conducting a **Significant Event Audit** of patients diagnosed with late stage lung cancer.
- Initial planning to implement **Multi Diagnostic Clinics** (non-specific symptoms clinics) across our 4 Trusts.
- Establishing a **Pooled Radiology** project which is actively working towards implementing Alliance wide reporting of chest x-rays and CT Scans for suspected lung cancer patients across our 4 Trusts.

## Patient Experience and Engagement:

In May, the Patient Experience team supported the organisation of our 4th Cancer Assembly to show case the work being done across L&SC. This event was well attended and received some excellent feed back. The content of the Assembly agenda was led by our '*Peoples Voice*' group and included themes ranging from 'Who are the ICS and how they relate to us' to discussions relating to the roll out of 'Targeted Lung Health Checks' which will be in operation across Blackpool and East Lancashire before the end of this year.

The absolute 'show stopper' was a candid talk from a member of the 'Peoples Voice' who described her personal experiences of our cancer services with great humour, insight and dignity.





The 'Peoples Voice' is a virtual group of people with a common interest in influencing cancer services in L&SC. We are currently working with the ICS communications team to bring the 'Cancer People's Voice' into line with the other similar Patient Experience groups within the ICS.

We have just recruited a Service User Involvement officer to work in our team who will facilitate the development of this function.

# **Other Successes:**

We helped ELHT with their bid and business case for a Macmillan Cancer Information and Support Service.

The funding has been secured and the Centre Manager is now in post.

The Alliance has developed a dashboard combining data from many available sources to help inform us about local area services, our population and drive service improvement. We also use it to monitor monthly data items such as emergency presentations, cancer waiting time performance, cancer staging, activity, capacity and demand and much more. We are also engaged with CADEAS (Cancer Alliance Data, Evidence and Analysis Service) which also

provide their own dashboards for all Alliances under a platform called CancerStats.

http://cancerstats.ndrs.nhs.uk"

For further information contact: jason.gladwin@nhs.net





