

NEL Cancer Alliance Primary Care Update November 2021

1 Referrals: checking the availability of patients

Patients missing appointments continues to be an issue experienced by each of our providers. When referring patients, please check their availability to attend appointments over the next couple of months and also please remind them of the importance of attending their cancer appointments.

To help show that appointments are safe from covid, patients can watch our short [‘keeping cancer services safe’](#) video.

To emphasise the importance of attending cancer appointments, patients can watch our [‘cancer won’t wait for covid’](#) video.

2 Increasing the number of referrals

We are aware of the pressure all our GPs are under across north east London and we stand with you against the unacceptable increase in violent and abusive incidents from the public.

As an alliance, we want to do all we can to support you in helping to get the number of 2ww cancer referrals back to pre-pandemic levels.

If you have any ideas as to how the North East London Cancer Alliance can help, please email p.thomas6@nhs.net

3 Delayed reporting of some HPV cervical screening cases

Cervical Screening London endeavours to ensure that 98% of all women will receive their result letter within 14 days of the sample being taken. Whilst this has been achievable for the majority of reports issued by CSL, over the last few months, a proportion of those abnormal cases requiring Consultant Cytologist opinions have been taking some weeks to report.

CSL apologises for these delays and would like to reassure you that the consultant staffing difficulties that have caused the delays in reporting are being addressed with additional recruitment and in-house training, as well as commissioning of additional reporting sessions. We anticipate that the turnaround times for the reporting of all cases will return to expected levels by the end of November.

4 Correct process for submitting cervical samples

Earlier in the year, we highlighted that incorrect samples were being included in the purple bag for Cervical Screening London (CSL). This has improved, which is great news, and we thank you for your hard work.

CSL are still receiving about 300 incorrect samples a month across London, including blood samples and swabs. They are not always able to redirect the samples to the correct labs as this is time-consuming and some samples expire quickly. This may cause delays and inconvenience for patients if tests need to be repeated. **Please can you make sure that practice staff are aware that only cervical samples should be included in the purple bag for CSL.**

5 Ending the YouScreen cervical screening project

The [YouScreen study](#), which is running in 132 north central and north east London GP practices, will end on 31 December 2021.

A big thank you to GPs participating in this pilot. We have almost reached our target of 7,000 self-samples returned.

Practices should note the following to help the study close in time:

- All practices will be closed to recruitment by the end of November – you will get 4 weeks' notice.
- The YouScreen team will contact you separately via email with your closure date and further instructions.
- Please make the most of the time up to the end of November to help your population to be screened.
- Kits should not be offered by GP practices after 30 November 2021.
- Please encourage patients to return their kits as soon as possible by post, using the envelope provided.
- Self-samples arriving at the laboratory after 31 December 2021 **will not be tested.**

Please remember:

- Keep offering YouScreen kits opportunistically until your site is closed to recruitment.
- Complete the YouScreen EMIS template for all offers.
- Complete the sample tube label AND remind women to return the lab request consent form.
- Code self-sample results in EMIS.

The YouScreen study team will be contacting participating practices to provide further information on the close down. In the meantime, if you have any queries, please contact youscreen@kcl.ac.uk.

6 Important update about the new NHS Cervical Screening Management System

NHS Digital is designing and developing a safe and stable new system and is working at pace to support this. In the interest of clinical safety, which is a priority throughout this process, it has been agreed that further time is needed to develop and test the new system to ensure that it can be deployed safely.

It has therefore been agreed to **postpone the launch of the new system from 30 October 2021. NHS Digital is working on a revised timing plan, which will be communicated as soon as it has been confirmed.**

All organisations are expected to continue to complete a number of IT pre-requisites to prepare for the new system and a recap of these requirements is below.

NHS Digital is seeking your support to ensure that all providers of NHS Cervical Screening Programme services have actioned the following steps by 1st December 2021:

1. Update devices with the latest software

To access the new NHS Cervical Screening Management System, additional software will need to be installed on your provider's devices. Almost 90% of NHS organisations who provide NHS Cervical Screening Programme services have already downloaded and started testing NHS Credential Management. Your providers IT department should already be aware of these requirements however we advise that they check with their IT lead to ensure that the deployment will be completed as soon as possible. For more information, please follow the guidance about the IT requirements.

2. Arrange for NHS smartcards to be set up and updated

Access to the new system will be via an NHS smartcard only and we are very grateful to those providers who have already arranged access for staff using their smartcards. NHS smartcards will replace access via an Open Exeter username and password. All staff who need access to the NHS Cervical Screening Management System will need to have an NHS smartcard with the correct role, workgroup profile and permissions in place before they can use the new system. Staff who do not currently have an NHS smartcard set up, ready to use with the new system should contact their local registration authority to apply for one as soon as possible. So far more than 21,000 members of the workforce have updated their smartcards. Please use the guidance to ensure NHS smartcards have been updated accordingly by the deadline.

3. Install NHS smartcard readers

All organisations will need to ensure that smartcard users have access to an NHS smartcard reader to use with the new NHS Cervical Screening Management System. For more information, please follow the guidance about the IT requirements.

Who can I contact for more information about these important changes?

To find out more about the new NHS Cervical Screening Management System please visit www.digital.nhs.uk/cervical-screening.

If you have any specific questions about the new system, please contact NHS Digital directly by email: screening.implementation@nhs.net.

7 Improving bowel screening uptake in our Muslim communities

We are working with the British Islamic Medical Association, as well as the following mosques in north east London, to help increase the uptake of bowel screening:

- Noor Al Islam Mosque (Waltham Forest)
- Lea Bridge Road Mosque (Waltham Forest)
- Al Madina Mosque (Barking)
- Shah Jalal Mosque (Newham)
- Redcoat Mosque (Tower Hamlets)
- East London Mosque (Tower Hamlets)

Our approach is in the form of a presentation on the benefits of bowel cancer screening, delivered at the mosque by a health professional who is also a trusted community member.

Ahead of this, during the next couple of months, we are hosting a series of focus groups with community members to get feedback on this approach to make sure it is effective and meets the needs of the population.

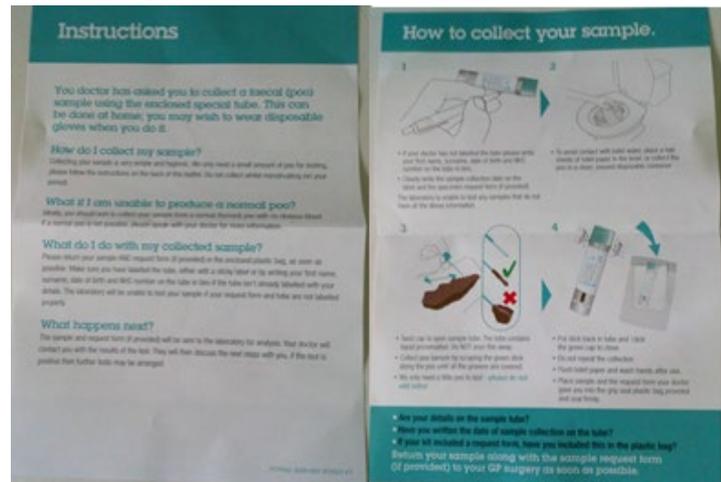
If you are interested in hearing more about this project or want to get involved, please email jake.chambers@nhs.net

8 Change in way FIT tubes are supplied for GPs using the Barts Health Lab

You will shortly notice a change in the way that the Barts Health supplies FIT tubes to your practice; we hope this will be an improvement in the service for you and your patients (only applies to GPs using the Barts Health Lab).

- In future we will supply sample collection kit envelopes containing:
 - the FIT tube and specimen bag
 - patient instruction sheet (in English)

This envelope should be handed to the patient with your TQuest label/request form



• Patient instruction leaflets in eleven other languages are available <https://www.healthylondon.org/suspected-cancer-referrals/patient-information-leaflets>

Please remind patients to ensure their name is on the sample (ideally with a TQuest label) and to write the date of sampling on the tube

- A video for patients on how to take a FIT sample is available <https://youtu.be/MOeQ-IJS2mw>

We propose to send out a box of 100 envelopes to each practice very soon. Once use is established, we will aim to distribute envelopes quarterly (larger practices receiving greater numbers) saving you the need to send frequent emails for supplies.

9 NHS London Breast Screening Recruitment Campaign

Breast screening mammographers play a vital part in NHS London's cancer services, and help to detect cancer in approximately 9 in every 1,000 women who are screened. Screening can help to find breast cancers early, when they are too small to see or feel and usually easier to treat.

We are recruiting qualified mammographers, radiographers looking to specialise, and trainees to join breast screening staff and patients working together to save lives.

Mammography is a rewarding NHS career, working directly with patients to help ensure we continue to detect early signs of cancer. There are flexible working opportunities in a range of NHS organisations across London, with opportunities for real career progression.

Find out more at www.london-breastscreening.org.uk/working-for-us

10 Cancer Care Reviews

As a reminder, please note that Cancer Care Reviews are to be done within 12 months of a cancer diagnosis (rather than six months).

There is also a new indicator regarding an offer of support within 3 months (CAN indicator 005, based on NM204). This is the percentage of patients with cancer, diagnosed within the preceding 12 months, who have had the opportunity for a discussion and been informed of the support available from primary care, within 3 months of diagnosis.

Most practices will see patients with a new cancer diagnosis following assessment and management in a secondary or tertiary care setting. This indicator aims to encourage GP practices to proactively provide patients with the opportunity for a discussion to make them aware of the support available from their GP and wider practice team. The intention is to facilitate early and supportive conversations and ensure patients are aware of what help is available.

Macmillan Cancer Support has produced [10 top tips](#) to help primary care professionals to carry out effective Cancer Care Reviews. The Royal College of General Practitioners has a useful [web page](#) on Cancer Care Reviews, with links to where to find the template on EMIS and further advice and tips.

11 Implementation of the early cancer diagnosis QI module

An hour-long video is available from the Royal College of General Practitioners, which is just focused on QoF. It does not focus on the DES but is interesting and very much QI focused: <https://www.youtube.com/watch?v=Sd8a-6ut-AI>

12 Waiting rooms resources from CRUK

Cancer Research UK provides a range of free printed resources and animations for use in GP waiting rooms. The full list is here: <https://publications.cancerresearchuk.org/>

13 Third vaccine dose

People who are severely immunosuppressed due to underlying health conditions or medical treatment are being identified and offered a third primary dose of COVID-19 vaccination to help reduce the risk of getting seriously ill.

JCVI guidance recommends that a third dose be offered to individuals aged 12 years and over with severe immunosuppression, including those who are being treated for

conditions such as cancer or for those with long-term chronic conditions where their immunity is significantly affected by regular medication.

A list of conditions and treatments which identifies people who are considered severely immunosuppressed has been published by the JCVI and is available here: <https://www.gov.uk/government/publications/third-primary-covid-19-vaccine-dose-for-people-who-are-immunosuppressed-jcvi-advice>.

If a vaccination cannot be offered at hospital at the time of the patient's visit, the patient will be given a letter from their consultant, copied to their GP, so they can access a vaccination at an alternative clinic near to where they live.

If a patient has already received a letter from their consultant or GP advising on when they should have their third dose, they can take the letter to a walk-in vaccination site. Vaccinators will not be able to administer the vaccine without this letter.

It is recommended that the third dose be given at least eight weeks after the second, as part of the primary course of immunisation. If the patient's GP or consultant believe that an alternative interval should be offered, because of ongoing treatment or starting treatment which will suppress the individual's immune system, then this timing may be altered.

Clinicians have been identifying patients who need a third primary dose due to immunosuppression. The NHS is now writing to patients who may be eligible, so they can talk through their options with their GP or consultant if they have not done so already. In the meantime, any patient who has not yet been contacted but thinks they may be eligible can contact their consultant for an update.

14 COVID Cancer Antibody Survey

The NHS has launched a COVID antibody survey exclusively for people living with cancer.

Please encourage patients who are 18+ with a diagnosis of cancer in the last year or undergoing cancer treatment to sign up here: <https://covidcancersurvey.uk/>

Patients can find out their antibody response and help the NHS better understand the level of protection in cancer patients.

15 Quality of life survey

On Monday 25 October, NHS England and NHS Improvement and NHS Digital published the first results from the [Cancer Quality of Life Survey](#). The rolling survey, launched in 2020, provides valuable information to NHS staff and researchers on cancer patients' quality of life. This can be used locally and nationally to inform policy and planning. It can also be used for ongoing monitoring and research.

All the data is now available on a public-facing data dashboard [CancerData](#). The first release of the dashboard includes aggregated, anonymised data from almost 35,000 cancer patients, 18 months post-diagnosis. The initial release includes data from the first three cancer types reported; breast, prostate and colorectal. More cancer types will be added as the survey expands.

The overall cumulative response rate for NEL CA remains to be 37% (up until the end of September 2021). This is second lowest in the country and more than 10% below the national average.

Please, help us promote and increase the response rate to this very important survey – contact **Paul** p.thomas6@nhs.net or **Barbara** barbara.kruszynska@nhs.net for discussions around ways to help raising awareness about the survey.

Read more information on our North East London Cancer Alliance webpages or visit www.CancerQoL.england.nhs.uk

16 National Cancer Patient Experience Survey (NCPES) – Briefing Paper August 2021

The NCPES is a national survey conducted by Picker and commissioned by NHS England. Trusts in the UK submit a patient list to Picker of patients who had an inpatient or day case admission in April, May, and June of that year. Picker send out the questionnaire to these patients on our behalf. The formal survey did not take place last year and the NCPES advisory group have made changes to the questionnaire.

The new questionnaire for 2021 can be accessed [here](#). New sections have been added to cover care planning, treatment, immediate and long-term side effects and living with and beyond cancer

Our response rate is low. It is the responsibility of all staff working with cancer patients to remind them and encourage them to complete the survey. The more responses we receive the more accurate the data is leading to informed change.

17 Launch of results for U16 Cancer Patient Experience Survey

A diagnosis of childhood cancer understandably has a devastating impact on the emotional health and wellbeing of the child and their family, both during and after treatment. Children and young people's treatment and experience of cancer differs greatly from adults and we recognise the need for a personalised approach to their cancer care.

It's so important for us to listen and learn from children and young people in order to provide them with the best possible care and experience throughout treatment and to reduce the impact it has on them later in life.

On 27 October 2021 the first set of results were released and have shown us that 95% of children with cancer aged between eight and 15 felt they were looked after well by NHS healthcare staff during 2020 and 92% of parents/carers rated the overall experience of their child's care as 8 or more out of 10.

It is encouraging to see that children and their parents rate the care and treatment they received positively and this survey is an opportunity to identify what's working and what could be done better, engaging with patients, parents, NHS cancer staff and charities.

A webinar is being held on the 2nd of December 2021 to discuss the results of the survey. You can register for the webinar at www.events.england.nhs.uk/events/u16-cpes-webinar.

For more information and to view the full set of results visit www.under16cancerexperiencesurvey.co.uk/results.

18 Cancer electronic safety netting toolkit and webinar for GPs

In collaboration with the Transforming Cancer Services Team for London (TCST), [a toolkit](#) has been produced for cancer that can be used by GPs faced with various cancer-related clinical situations. The toolkit gives GP practices a template/form that schedules diary reminders in their system and reminds and alerts practice staff to follow up at a later date. EMIS Web made our solution nationally available on their system from mid-2018, so all GP practices using EMIS Web are able to access the toolkit.

To talk through the latest updates to the toolkit, there is a webinar on electronic safety netting from 1pm to 2pm on 23 November 1-2pm and is open to all GP staff: register here:

[Webinar \(microsoft.com\)](#)

The webinar will cover:

- EMIS Web E-SN toolkit – the latest updates
- Adapt and adopt and scaling up

- GP panel discussion with GP adopters
- Drivers, enablers, challenges, future
- Other tools that identify as 'E-SN' - supporting you to choose a robust system
- What is E-SN? – expectations and standards and call for next steps

This event is open to ALL GP practices using EMIS Web.

19 Prostate Cancer UK free training for GPs and Practice Nurses

Prostate Cancer UK are delivering some free training for primary care.

The training will take place across the month of November and will include a range of live and pre-recorded sessions, including:

- PSA, Best Practice, and the Diagnostic Pathway
- Panel discussion; The prostate cancer diagnostic pathway
- The psychological impact of not treating a cancer
- Hormone Therapy for Prostate Cancer

GPs and practice nurses can register via the website and will be notified of the full programme and can pick which sessions to attend. You can find out more and sign up [here](#).

20 Cancer resources for primary care and patients

As a reminder, here are some of our latest videos:

- Breast screening: <https://youtu.be/5F3eolM8KqI>
- Cervical screening: https://youtu.be/AjB_6641D-Q
- Bowel screening: <https://youtu.be/53PObqeNtPk>
- Overview of your chemotherapy treatment: <https://youtu.be/HmrvFfQHtcg>
- Understanding your potential chemotherapy side effects: <https://youtu.be/s7xO-jsfM6c>
- Overview of your immunotherapy treatment and potential side effects: https://youtu.be/_uxblaNLKIM

Other resources include:

Meet our patient reps: <https://www.eastlondonhcp.nhs.uk/aboutus/meet-our-patient-and-carer-representatives.htm>

You can find the latest resources for primary care on our dedicated web page: <https://www.eastlondonhcp.nhs.uk/aboutus/primary-care.htm>

A full list of patient resources is here: <https://www.eastlondonhcp.nhs.uk/aboutus/patient-information.htm>

21 For more information

Web: <https://www.eastlondonhcp.nhs.uk/aboutus/north-east-london-cancer-alliance.htm>

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