

Update On Cancer

Council of Representatives
15th October 2018

Dan Cottingham – Macmillan GP Cancer and End Of Life Lead

Context Now

- **Cancer Alliance** 'in flux' and defunding national for Cancer 62 Day performance (all Cancer Alliances failed this in Q2)
- However, local cancer recovery dependent on Cancer Alliance and STP transformational funding
- Cancer Alliance Board refreshing priorities and clinical strategy – clinical workshop 19th October
- **Local clinical leads:** Dan for diagnostics, YFT Colorectal lead and S&R CCG Gov Body GP supporting urology as STP
- Need a coherent and aligned local Cancer recovery plan with YFT, Cancer Alliance and other partners
- Focus for C62 Day remains on moving from 14 days to 7 days for urgents, addressing DNAs and timed pathways (lung, colorectal and prostate)
- 2WW referrals increasing and pressures on radiology capacity locally and across STP – local radiology recovery plan starting
- Cancer leads now in place in every practice bar 3

CCG Improvement Assessment Framework

Clinical Priority Area: Cancer



Vale of York
Clinical Commissioning Group

CCG received a supplementary assessment to the IAF 2017/18 overall rating, specifically regarding the clinical priority area of Cancer, and received a rating of **Requires Improvement**.

This is the same rating received for Cancer in 2016/17 so there has been no deterioration year on year.

Cancers diagnosed at early stage is close to national trajectory and CCG performs well against peers and in STP.

One year survival rate has improved year on year but is below national trajectory and is a priority for improvement.

Cancer patient experience has been refreshed since the assessment and remains stable at 8.9, which is the highest in the STP.

Cancer 62 days is 81.5% (target 85%) but remains highest in the STP.

Early Diagnosis

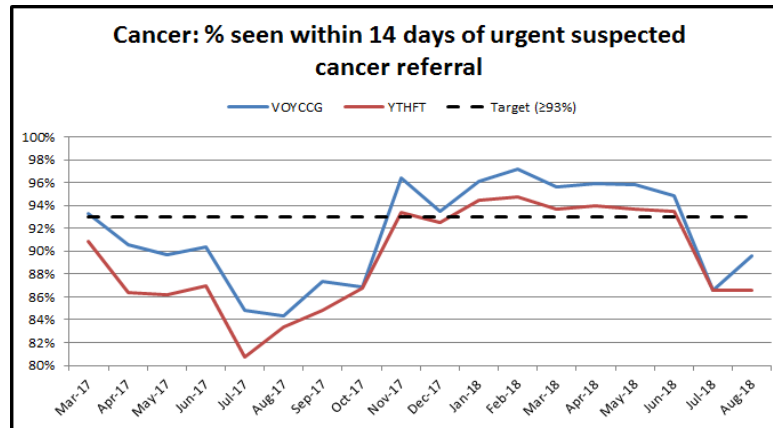
- Early Detection Saves Lives
- HCV Cancer Alliance recruited 2 Volunteer Co-ordinators to train Cancer Champions across Yorkshire & the Humber
- Half-day sessions for non-clinical staff which focus on early signs and symptoms of cancer and how to approach the subject with friends and family
- Would like to engage with staff working at GP surgeries and will come out to you – email: eryccg.cancerchampion@nhs.net
- Sessions also available at West Offices on Friday, 26 October 2018 and York City Football Club on Thursday, 8 November 2018.

Screening

- Increasing screening rates should decrease the numbers of later stage disease and improve survival.
- Screening is particularly poor in the learning disabilities communities which we are looking to improve and share areas of good practice.
- Traditionally GP practices have not been involved in bowel screening but now all bar two practices endorse the letters sent to patients which improves uptake. There is a protocol on EMIS and SystemOne that can be activated to show when a patient has not submitted their screening test (current screening is for patients aged between 60 and 74).

Cancer 2 week waits

- 2WW referrals for prostate cancer have increased following Stephen Fry/Bill Turnbull publicity which has impacted on VOYCCG 2WW performance



- Conversion rate for Urology, Dermatology and Lung has increased and more cancers are being diagnosed from referrals.
- Colorectal 'Straight to Test' pilot was successfully completed in September 2018 and YTHFT are now looking to rollout as 'business as normal' wef December 2018. Welcome feedback from GPs on how this worked in Primary Care?
- YTHFT Clinical Team advised that there are now significant clinical risks for Dermatology patients and an options paper is being taken to Corporate Directors/Trust Board in October to improve the current service.

2WW Cancer Breaches in August 2018

- 116 x 2WW breaches from a cohort of 1,114 patients.
- 80 breaches related to skin cancers due to medical staffing issues and inadequate clinic capacity in Dermatology.
- 15 Lower Gastro breaches - 7 were due to lack of outpatient capacity but 5 were due to patient choice.

DNAs

- Patients who DNA first appointments are more likely to breach 62 Day Cancer Standard
- We have sent an email to encourage leaflets to be handed to 2WW patients
- We need your help to understand why patients DNA
- Ensure patients are aware this is an 2WW Referral, have correct mobile number and are available in next 14 days.

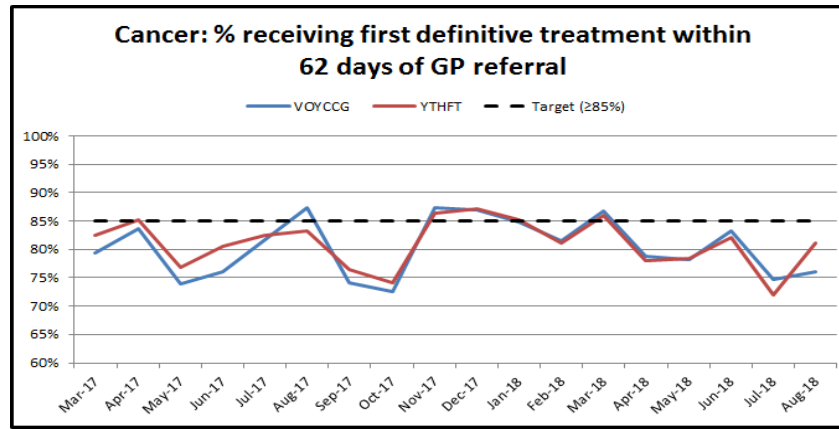
21 x 62 Day breaches in August 2018

- 5 Urology, 4 Gynaecology, 2 Head & Neck, 3 Lung, 2 Lower Gastro, 1 Upper Gastro, 1 Breast, 1 Haematology and 2 Skin.

Dermatology: 2WW

- Increasing cancer with decreasing capacity (national shortage of Dermatologists)
- Dermatoscopes provided by YAC are starting to make an impact and we need to continue this work by improving the quality of the pictures and ensuring THREE photos are sent with each referral
- YAC have helped us fund some packs to improve that uptake which are being distributed today
- YAC are also funding a free day's GP education for one GP from each practice on 18 January 2019 in Dermatoscopy. Please save the date and nominate a GP from your practice – email to follow.

62 Day Cancer Standard not being achieved locally or nationally



- £10m nationally has been made available to support recovery of the 62 day performance target. North of England's share of these monies is circa £2.7 million and the current proposal 'on the table' is that these monies should be targeted to recover the position in urology and upper/lower GI
- HCV Cancer Alliance are working with acute trust across Yorkshire & the Humber to implement optimal pathways for Colorectal, Lung and Prostate
- Patient Tracking List Co-ordinators recruited to improve IPT processes and identify reasons for delays
- VOYCCG and YTHFT working on a joint 62 Day Recovery Plan and we would welcome GP input

Patient Experience

- A success for Vale of York CCG and York Hospital
- Key findings from the National Cancer Patient Experience Survey 2017 were published in October 2017
- Patients were asked to rate their care on a scale of zero (very poor) to 10 (very good). The average score for England and HCV was 8.8
- Respondents gave ratings of 8.9 for York Hospital and VOYCCG, both above average performance and remaining static from 2016
- SRCCG scored 8.7 in 2017, a decline of 0.3 on their 2016 rating, when they were top at 9.0.

End of Life Care

Dan Cottingham is utilising his extra day of work to look at End of Life care in more detail.

Working with the Palliative and End of Life Care Group we are looking to set up an EPaCCs system to enable communication between GP practices, hospices, YHFT, out of hours and hopefully the ambulance service too.

We have looked at two systems but favour Black Pear and are hopeful to announce something soon.

We have also just reviewed the fast track system and are continuing to try to improve this further.

Gold Standards Framework for Care Homes - PMG