

## **Cancer care update**

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Minute

Item

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Bringing together Croydon, Kingston, Merton, Richmond, Sutton and Wandsworth

## Outline

- South West London Cancer catch up-Pandemic
- Urological Cancers
- Lung Cancers
- Merton community events
- Primary Care Networks

## South West London- Covid Cancer catch up

### 31 day 1st Treatments: Q1-Q3 2019/20 vs 2020/21

#### <u>SWL</u>

Turney Turne	C	1	Q2		0	3	Q1-Q3			
Tumour Type	2019/20	2020/21	2019/20	2020/21	2019/20	2020/21	2019/20	2020/21	Difference	
Urological	458	234	446	330	448	401	1,352	965	-387 🔺	
Breast	348	187	382	232	383	322	1,113	741	-372 -	
Lung	229	159	224	174	226	178	679	511	-168	
Lower Gastrointestinal	187	136	201	187	186	191	574	514	-60	
Skin	271	206	268	270	312	317	851	793	-58	
Head & Neck	79	56	81	95	95	74	255	225	-30	
Haematological	143	126	125	113	143	147	411	386	-25	
Sarcoma	43	36	39	34	53	45	135	115	-20	
Gynaecological	91	94	89	97	115	93	295	284	-11	
Brain/Central Nervous System	25	15	15	42	46	26	86	83	-3	
Other	31	27	24	36	34	35	89	98	+9	
Upper Gastrointestinal	115	117	136	129	112	131	363	377	+14	
Children's	30	42	26	26	21	34	77	102	+25	
Total	2,050	1,435	2,056	1,765	2,174	1,994	6,280	5,194	-1,086	

Women is major gap

Likely driven by screening

Covid risk

Graph showing numbers of patients treated from Q1 to Q3, comparing 2019/20 to 2020/22

2.400

# 'Missing' 1st treatments

There are shortfalls in the number of people starting treatment for some tumour types compared to before the pandemic, this represents a clinical risk that people are not having cancer diagnosed and starting treatment.

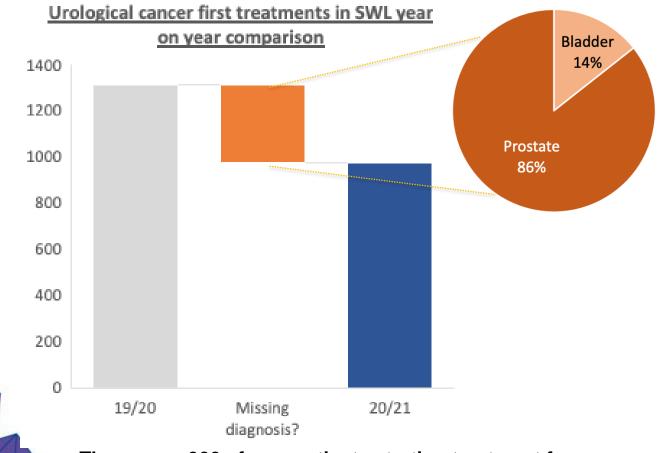
<u>31%</u> less people are starting treatment for <u>Breast</u> cancer in M&W: Potentially explainable by the screening programme backlog, need to remind people to attend screening appointments and to get symptoms checked.

#### <u>8%</u> less people starting treatment for

**Prostate/Bladder cancer in Merton and <u>22%</u> less in Wandsworth. <u>6%</u> and <u>49%</u> less for Lung Merton and Wandsworth respectively: Potentially driven by people overlooking symptoms for these cancers, an aversion or hesitancy to approach primary care, or confusion with covid symptoms (Lung).** 

	PROST	ATE & BLADDE	R	
	2019-20	20-21	Difference#	Difference%
NHS CROYDON	238	148	90	38%
NHS KINGSTON	115	77	38	33%
NHS MERTON	83	76	7	8%
NHS RICHMOND	92	75	17	18%
NHS SUTTON	118	77	41	35%
NHS WANDSWORTH	93	73	20	22%
Grand Total	739	526	213	29%
		BREAST		
	2019-20	20-21	Difference#	Difference%
NHS CROYDON	205	145	69	29%
NHS KINGSTON	91	59	32	35%
NHS MERTON	80	55	25	31%
NHS RICHMOND	98	78	20	20%
NHS SUTTON	120	99	21	18%
NHS WANDSWORTH	127	87	40	31%
Grand Total	721	523	198	27%
		LUNG		
	2019-20	20-21	Difference#	Difference%
NHS CROYDON	99	73	26	26%
NHS KINGSTON	48	30	18	38%
NHS MERTON	52	49	3	6%
NHS RICHMOND	42	40	2	5%
NHS SUTTON	81	72	9	11%
NHS WANDSWORTH	82	42	40	49%
Grand Total	404	306	98	24%

## Urological cancer and the pandemic



There were 300+ fewer patients starting treatment for Urological cancers in 20/21 across SWL (compared to the same period the previous year)

#### **Possible explanations**

- Remote triage -Reduction in urine dips
- Women repeated treated for UTI without dip/referral for cystoscopy
- Reduced opportunity for opportunistic PSAs
- Reduction in patients presenting for annual PSA tests on 'watch and wait'

# Lung Cancer catch up

- Significant reduction in cancer diagnosis
- Worse in Wandsworth
- Emphasise message
  - Persistent cough
  - Blood in sputum
  - Unexplained weight loss
  - Long term smoker



	Fin Year	Quarter/Month	Urological	Breast	Skin	Lower Gastrointestinal	Lung	Haematological	Upper Gastrointestinal	Gynaecological	Head & Neck	Other	Brain/Central Nervous System	Sarcoma	Children's	Grand Total
	≡2019/20	Q1	373	257	236	159	160	108	87	81	59	18	16	8	11	1573
		Q2	355	269	225	150	149	91	98	71	63	16	9	17	4	1517
		Q3	352	271	264	172	149	104	106	92	68	22	24	12	4	1640
		Q4	346	294	212	150	137	104	66	76	68	16	19	10	8	1506
	2019/20 Total		1426	1091	937	631	595	407	357	320	258	72	68	47	27	6236
	■2020/21	Q1	203	127	175	118	112	101	84	72	51	17	9	13	25	1107
		Q2	254	176	237	156	121	99	110	64	72	23	28	8	9	1357
		Q3	325	244	256	161	141	110	92	70	55	22	12	8	12	1508
		Q4	262	219	249	158	133	120	99	88	85	19	23	12	9	1476
Ρ	2020/21 Total		1044	766	917	593	507	430	385	294	263	81	72	41	55	5448
bg	<b>■2021/22</b>	Q1	335	270	279	170	143	110	112	79	74	23	19	16	6	1636
Je		Jul-21	144	101	86	56	62	41	22	33	27	16	4	7	5	604
7	2021/22 Total		479	371	365	226	205	151	134	112	101	39	23	23	11	2240
Grand	d Total		2949	2228	2219	1450	1307	988	876	726	622	192	163	111	93	13924

	Urological	Breast	Skin	Lower Gastrointestinal	Lung	Haematological	Upper Gastrointestinal	Gynaecological	Head & Neck	Other	Brain/Central Nervous System	Sarcoma	Children's	Grand Total
2019/2020 Quaterly Treatment Average	357	273	234	158	149	102	89	80	65	18	17	12	7	1,559
Diff Between 2019/20 & 2020/21 Total Treatment Volumes	-382	-325	-20	-38	-88	23	28	-26	5	9	4	-6	28	-788
Rolling Deficit/Increase	-378	-318	33	-22	-81	38	43	-21	20	24	4	1	30	-627
2019/20 vs 2021/22 Quarterly Activity cf	-10%	5%	18%	7%	-11%	2%	29%	-2%	25%	28%	19%	100%	-45%	4%

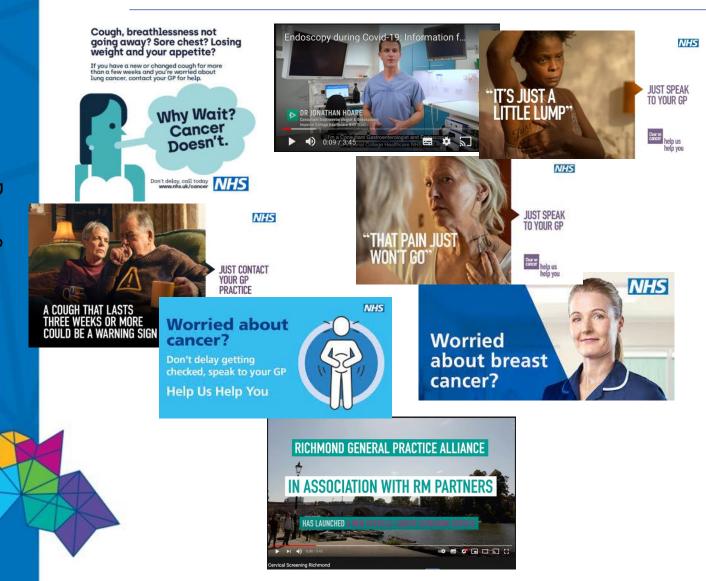
\*Rolling Deficit - (Gap between 2019/20 & 2020/21) + (Diff 19/20 Avg - 21/21 Actuals)

#### Source: CWT from NHS Digital

RM Partners, West London Cancer Alliance – Hosted by The Royal Marsden Hospital NHS Foundation Trust

RM Partners West London Cancer Alliance

## Communications



We have run **patient and public communications and social media campaigns** during Covid to **restore public confidence and encourage people** to continue to access Cancer Services with cancer symptoms to visit their GP.

In Dec 20-Jan 21, we ran cancer symptom awareness and breast awareness campaigns on radio, social media and "out of home" platforms. In May-June 21, further targeted campaigns have run on breast, lung, skin, prostate cancer and general cancer symptoms.

We are now broadening our approach to engaging with patients and the public within our local communities and working with community and voluntary sector leaders to further embed cancer awareness messages to support recovery.

# Actions to support

- Cancer Screening Services- have onboarded a service called 'Community Links' which provides multilingual support for patients who's first language is not English
- In addition to the general cancer communications, specific interventions are being developed to help tackle the inequalities that have been compounded by Covid. These include targeting 'rising' 60's, learning disabled, LGBTQ and extended access across the SWL Boroughs to support increase Cancer Screening uptake



## **Actions to support**



Help Us to help You social media campaign locally linking in with national campaign

#### Lung

#### **PUBLIC FACING**

"Do it for yourself" public facing campaign – working with MSD pharmaceuticals to roll out on bill board, pharmacy bags etc in most deprived areas of SWL

#### **PRIMARY CARE FACING**

Case finding project in Wandsworth – asking Practices of greatest deprivation to complete search of patients with recurrent lower respiratory tract infections. Practices are incentivised to undertake search, contact patient, request chest x-ray and have clinical review. Results expected early November to measure impact.

## Actions to support. contd

#### **Prostate & Bladder**

- Comms sent out to primary care teams on restarting PSA monitoring for patient at high risk of prostate cancer, and the importance of performing urine dip to check for blood where appropriate (linking with NWL RMP case finding work), including how to minimise impact from recent blood bottle shortage.
- Links in with public facing engagement work (as below)

#### <u>Breast</u>

- RMP have worked with the breast screening Hub and South West London Breast Screening Service (SWLBSS) to commission a multi-lingual service to call those patients who have not responded to their Open Invitation.
- SWL ICS and RMP are working closely with NHS England cancer screening commissioners and the SWLBSS service to ensure sufficient capacity to recover the service by July 2022. A further recovery action plan is being agreed.

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## Local community engagement messages

		Public		Team	the second s		
Event	- Borough	Audience	<ul> <li>Location</li> </ul>	Owner	Point of contact	• Date 🚽 Time	Requirement
African Caribbean Family Fun Day	Sutton	Public	Hill House Community Centre		Claire Coutts	31-Jul-21	In person stand
Patient participation group (PPG)	Richmond	Public	Online	ML	Rachel Swan	03-Aug-21	11:35 Short presentation
Patient and Public Involvement Reference Group	Wandsworth & Merton	n Public	Online		Claire Coutts	04-Aug-21	Short presentation
Asian themed family day	Sutton	Public	Hill House Community Centre		Claire Coutts	08-Aug-21	In person stand
PCN health and wellbeing funday	Merton	Public	Pollards Hill	DW	Navdepp Alg	28-Aug-21 All day	In person stand
Whitton Fair	Kingston	Public	Whitton, Kingston		Rachel Swan	30-Aug-21	Provided materials to Rachael to leave o
Communications & Engagement meeting	Kingston & Richmond	N	Online		Rachel Swan	07-Sep-21 10:00-11:30	
Patient and public forum	Kingston	Public	Online		Rachel Swan	08-Sep-21 11:00-12:00	
Community involvement event	Richmond		Online		Rachel Swan	14-Sep-21	
Croydon BME Wellbeing Centre Prostate Event	Croydon	Public	Online - future in person events at Whitgift shopping centre		Andrew Brown	20-Oct-21	Need to contact andrew@bmeforum.or to discuss details. John
Residents association meetings	Wandsworth & Merton	n Public	Merton Park Colliers Wood Raynes Park West Barnes		Claire Coutts	Various	
North Merton PCN PCN event	Merton	Public			Satnam Bains	06-Nov-21 14:00-18:00	
WCEN women from black and ethnic minority community event	Wandsworth	Public	Mushkil Aasaan		Anissa Daud	Sept and Jan (2 events)	Looking for femal HCP from South Asian (Sep) and Somali (Jan) background to ta about Breast cancer

# **Engagement Strategy**

Discuss cancer priorities with patient groups, partner organisations or community teams

Identify specific public events or networks that overlap with the cancer priorities

Take cancer warning signs and risk factors to specific public audiences



# North Merton Cancer awareness day

• 6<sup>th</sup> November



## Key Drivers on Missing 1st Treatments for all Tumour Groups

- <u>PCN/Practice visits</u> by Place (borough) cancer leads excellent uptake of these
- <u>RedWhale Primary Care education events</u> recently commissioned and ensuring missing first treatment targeting is included in the training package (starts Nov 2021 tbc)
- <u>Provision and roll out of non-site specific RDCs across SWL –</u> St Georges Trust now accepting referrals to all SWL boroughs, Epson and St Helier site also just opened, Kingston and Croydon in development, Wandsworth also have coverage from C&W ADOC. SWL webinar to Primary Care (planned October 2021) along with further comms to Primary Care teams highlighting the benefit of these clinics, so able to act on investigating vague symptoms suggestive of cancer, and highlight missing first treatment work.
- <u>Promoting Business As Usual activity</u> covid effect, and more recently impact of blood bottle shortage. Linking with NHSE guidance, discussed with Place cancer clinical leads and SWL/RMP cancer team, comms to Practices on importance of continuing blood testing where suspicion of cancer, which may facilitate diagnosis. Development of local toolkit on how virtual consults can be utilised to improve cancer diagnosis, and round table event being organised to determine best practice (primary, secondary care and patient representation)

Linking into other pathway groups, and CCG partners – such as recent presentations to Wandsworth Health and Care Board and Richmond Health Board. Promoting collaborative across pathways; to pick up cancers when not referred via a 2WR pathway.

# **Primary Care Networks**

- Primary care networks (PCNs) form a key building block to the <u>NHS long-term plan</u>
- 30–50,000 patients- Groups of GP practices
- Deliver key strategies for NHSE

# **PCN- Early Cancer PCN DES**

- NHS Long term Plan- 2028 75% of cancer diagnosis at stage 1 or 2 (currently 50%)
  - Increased 5 year survival, quality of life and treatment options
- Cross organisational work
  - RM Partners Cancer Alliance, SWL CCG, Macmillan, PCN, GP Federation

## **Cancer DES Requirements**

- 1. Review referral practice for suspected cancers, including recurrent cancers.
- 2. Contribute to improving local uptake of National Cancer Screening Programmes.
- 3. Establish a community of practice between practice-level clinical staff to support delivery of the requirements of the Network Contract DES Specification.

## Questions





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