

# NHS CANCER PROGRAMME

## UPDATE REPORT OCTOBER 2019 TO JANUARY 2020



# INTRODUCTION

The NHS Cancer Programme leads the delivery of the NHS Long Term Plan ambitions for cancer.

Leading change at the local level are Cancer Alliances working in collaboration with their local Sustainability and Transformation Partnerships (STPs) and Integrated Care Systems (ICSs).

This report provides an update on what we have achieved so far to deliver on our NHS Long Term Plan ambitions in quarter three of 2019/20.

# NHS Long Term Plan ambitions for cancer:

- By 2028, 55,000 people each year will survive their cancer for at least five years after diagnosis.
- By 2028, the proportion of cancers diagnosed at stage one and two will rise from just over half now to three quarters of cancer patients.



# **Earlier and Faster Diagnosis**

https://www.england.nhs.uk/cancer/early-diagnosis/

Diagnosing people earlier and faster is one of the most effective ways to improve cancer survival. It increases the treatment options and means people can start treatment sooner, making it more likely that cancer can be cured.

The NHS Cancer Programme is working with partners to: modernise screening, introduce new approaches for referring and diagnosing cancer more quickly and prioritise the rapid adoption of new early diagnosis techniques.

# Human Papillomavirus screening

From December, human papillomavirus (HPV) testing is now the primary test in the NHS Cervical Cancer Screening Programme across all parts of England.

### ...introducing this test could potentially take us towards making cervical cancer a thing of the past.

Almost all cervical cancers are linked to HPV. Screening for high-risk strains of HPV means the virus can be monitored and any cell changes spotted early, which could prevent around 600 additional cancers a year.

NHS experts have said\* that, combined with the HPV vaccine (now available to all 12 and 13-year-old boys, as well as to girls in school year eight), introducing this test could potentially take us towards making cervical cancer a thing of the past.

## **Faster Diagnosis Standard**

The NHS Cancer Programme remains on track to introduce the Faster Diagnosis Standard (FDS) from April 2020.

When rolled out, the FDS will give most patients a definitive diagnosis or ruling out of cancer within 28-days of referral from a GP or from screening. As well as reducing time from referral to diagnosis, it will also help tackle variation in patient experience by helping the NHS to pinpoint where it needs to speed up diagnosis.

We propose to set the FDS threshold initially at between 70-85%\* and expect this threshold to rise in future.

There will be further opportunities for partners to give their views on the future development of the standard as part of the NHS Cancer Programme's regular dialogue with the cancer community and governance meetings.

# **Spotlight on delivery**

https://www.england.nhs.uk/cancer/early-diagnosis/#be-clear

## Increasing screening take-up in West London

A review of national screening programmes\* was published in October 2019.

The review says that making screening services more accessible and giving people much greater choice over when and where they are screened could save thousands of lives a year.

Improving uptake of screening is a priority for Cancer Alliances who are working with their public health teams and local communities to encourage more people to take up the offer of screening.



Community Links telephone reminder service

A new bowel cancer screening telephone reminder pilot programme in West London has significantly increased take up of a bowel screening invitation.

The project is a collaboration between the West London Cancer Alliance and London-based charity Community Links and now covers GP practices across 14 CCG areas in West London.

People who have not responded to their bowel cancer screening invitation in the previous 12 months are contacted by a dedicated health facilitator. They will discuss the importance of the screening process, encourage them to take up the offer of screening, explain how to use the screening kit, and re-order the kit if required.

They are contacted again six weeks later to see if they have any questions, if they have received a resent kit and talk through how to use it if necessary.



Community Links staff and some of their promotional materials

Over 47,000 patients have been approached since the project began and over 31,000 have been contacted by telephone. Of these, approximately 23% have gone on to return their kits.

121 abnormalities have been detected which wouldn't have been picked up, if people not participated in the programme.

\*https://www.england.nhs.uk/wp-content/uploads/2019/02/report-of-the-independent-review-of-adult-screening-programme-in-england.pdf

# **Personalised Care and Support**

https://www.england.nhs.uk/cancer/living/

It is estimated that around 2.4 million people\* will be living with and beyond cancer in 2020. The NHS is leading the way in cancer care by recognising that quality of life outcomes are as important as survival.

The NHS Cancer Programme is working with Macmillan Cancer Support and other partners to ensure that people get the support they need. This includes putting key personalised care interventions in place, reforming follow-up care and measuring how well people are living after cancer treatment through the Quality of Life Metric.

\*https://www.macmillan.org.uk/\_images/cancer-statistics-factsheet\_tcm9-260514.pdf

# Pre-habilitation for cancer patients

Cancer Alliances are trialling how prehabilitation (prehab) schemes to help people get mentally and physically prepared for cancer treatment could work at scale.

Over Christmas, national media highlighted a number of schemes\*, including exercise support, that aim to give patients the best chance of a good recovery following treatment.



Trials of prehab, offering patients nutritional advice, counselling and exercise support before treatment have started in various Cancer Alliances, including Greater Manchester, West London, East Midlands, Wessex and West Yorkshire and Harrogate.

### National Cancer Patient Experience Survey 2019

The 2019 National Cancer Patient Experience Survey (NCPES)\* is now underway with nearly 120,000 cancer patients invited to share their experiences.

A poster campaign ("Cancer doesn't care who you are, but we do") ran in January 2020 to encourage more people to respond to the survey. Based on audience research commissioned by the NHS Cancer Programme, the campaign is particularly aimed at people from black and minority ethnic communities.

We are also delivering a new experience survey for under 16-year-olds with cancer, their parents and carers. The Picker Institute will develop and run the survey. Overseeing this work is an advisory group made up of a wide range of stakeholders including young people, parents, charities and NHS organisations.

# **Personalised Care and Support**

https://www.england.nhs.uk/cancer/living/

### Personalised stratified follow-up guidance

A new handbook from the NHS Cancer Programme to be published soon aims to help improve care and support for patients after cancer treatment.



The handbook is backed by the latest evidence and best practice on supporting people after cancer treatment. It warns against a "one size fits all approach" and makes the case for care based on four principles:

- Giving people the knowledge of what to look out for if their cancer comes back;
- Prompt access back to their cancer team if they have questions;
- Regular scans or tests (when needed);
- Personalised care and support planning focused on long-term health and wellbeing and support for self-management where appropriate.

With a focus health and wellbeing, implementing the guidance should also mean more patients making changes to their lifestyles to help prevent any cancer coming back.

Personalising care is good for the NHS too. By supporting people to manage their care where appropriate, the report says personalised follow-up care could release over 1 million outpatient slots that can be re-purposed to focus on those patients with the most complex needs. ...personalised follow-up care could release over 1 million outpatient slots that can be re-purposed to focus on those patients with the most complex needs.



# **Spotlight on delivery**

https://www.england.nhs.uk/cancer/early-diagnosis/#rapid

## **Rapid Diagnostic Centres (RDCs)**

Rapid Diagnostic Centres (RDCs) will, over the next five years, become a single point of access for all NHS patients with symptoms that could be cancer.

They will bring together diagnostic equipment and expertise, to ensure people receive a clear and prompt diagnosis and appropriate onward referral for treatment, whether they have cancer or not.

In 2019/20, all Cancer Alliances are expected to set up at least two RDC services in their local area - one for non-specific symptoms and one for a tumourspecific pathway.



The Leeds Cancer Centre at Leeds Teaching Hospitals Trust

The Rapid Diagnosis Centre service at Leeds Teaching Hospitals Trust is for anyone registered with a GP in Leeds who doesn't have specific symptoms of cancer but, after an appointment with their family doctor, agrees that further tests might be needed.

The service links up hospital diagnostic with local GP services so people can get a diagnosis, an all-clear or referred on for another health issues quickly and accurately, so they do not have to undergo multiple tests and admissions to hospital.

Anyone using the service is assigned a Clinical Nurse Specialist from the moment they are referred into the service which helps make sure people get a better experience of care and the right tests without unnecessary delay.



The RDC service started this month and was previously part of an earlier pilot programme to speed up diagnosis and refer people on to treatment when needed called Accelerate, Coordinate and Evaluate (ACE), which influenced the recently published RDC vision and specification\*.

For the three years to January 2020 the ACE pilot service had 2,106 referrals. In total, it diagnosed 132 cancers and 577 other serious conditions.

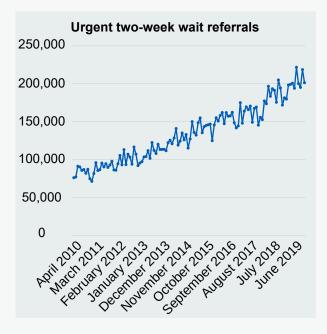
# **Operational Performance**

### NHS continues to see record demand

Latest NHS data shows the number of people seen within two weeks for suspected cancer has increased by 9.6% - or by 207,422 more people – in the 12 months to December 2019 on the same period a year ago.

These figures reflect underlying long-term growth in demand for cancer services, and record growth over the last two years. There are now more than double the number of urgent referrals every year compared to 2010. The number of referrals has grown by more than 10% in the each of the last two years to date.

It is vital that more people come forward if they suspect cancer, and receive a timely referral for further investigation. The National Audit Office has found that higher referral levels means cancer is more likely to be diagnosed earlier, less likely to be diagnosed as an emergency and survival rates are likely to be higher as a result.



The NHS is responding to the growing number of referrals - in the year to date we have treated more cancer than ever before, and now consistently every month over 10,000 people start treatment within 62 days of first being referred for tests (compared to around 7,000 per month ten years ago).



Meeting the huge increases in demand remains a challenge, which the NHS Cancer Programme and Cancer Alliances, working with providers, local systems and regional teams, are responding to. Backed by almost £134 million in funding this year, Cancer Alliances are working on a range of projects which include implementing Rapid Diagnostic Centres (see page 7), personalised stratified follow-up care (see page 6), and best practice diagnostic pathways (see previous update report\*).

Nationally, there is also £200m of new investment in diagnostic equipment, actions to increase staff in key cancer and diagnostic professions (see previous update report\*) and the new Faster Diagnosis Standard (see page 3) which will help reduce time from referral to diagnosis and tackle variation in patient experience.

# **World leading treatment**

https://www.england.nhs.uk/commissioning/spec-services/

### **Radiotherapy networks**

The Radiotherapy Learning Healthcare System (RT-LHS) was launched in partnership with the Royal College of Radiologists in October 2019.

It brings together a collaboration of key partners and the 11 new Radiotherapy Networks to deliver ambitious improvements in access and outcomes for patients.

The Networks will improve access for patients to existing cutting-edge technology and treatments. They will also help to speed up development of new treatments by offering more patients, where appropriate, the opportunity to take part in clinical trials.

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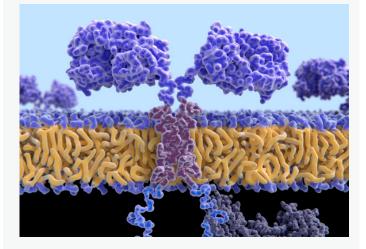
The Networks represent the next stage in NHS England's radiotherapy modernisation programme which has already invested £130 million replacing or upgrading over 80 radiotherapy machines.



# Access to innovative new treatments

So far this financial year, over 7,400 new patients have received cancer medicines through the Cancer Drugs Fund\*.

Of these, 870 had earlier access to treatments newly recommended by NICE (National Institute for Health and Care Excellence) through interim funding agreements. By negotiating significant discounts with companies, the NHS was also able to offer over 5,800 patients access to promising new treatments, not yet recommended by NICE, through Managed Access Agreements.



The NHS has also offered 270 patients access to one of two innovative new CAR-T (Chimeric Antigen Receptor T-cell) therapies since making them available in November 2018.

108 patients have used the new Proton Beam Therapy (PBT) centre at Manchester's Christie Hospital since it opened in December 2018.

# Workforce

# Free early diagnosis training tool for GPs

A new online cancer education tool is now available for free for all primary care professionals across England.

Known as GatewayC\*, the training tool supports GPs and primary care staff to make timely and clinically appropriate referrals for suspected cancer.



The tool includes a range of courses on different cancer types, with new content being added monthly.

Feedback on the tool from its 3,000 users has been positive, with GPs reporting referring patients with cancer sooner than they did before they started using the tool.

Funding to roll GatewayC out across the country is being made available by Health Education England.

### Multi-Disciplinary Team meetings guidance

Through Cancer Alliances, cancer teams in hospitals across the country have worked with patient and professionals groups to produce new guidance on streamlining Multi-Displinary Team (MDT) meetings\*.

...previous guidance for MDTs was almost 20 years old and needed to be updated as treatments and care have become more sophisticated and personalised.

Bringing together different health professionals and clinicians to discuss the best way to support and treat all patients continues to be the gold standard for cancer care.

Previous guidance for MDTs was almost 20 years old and needed to be updated as treatments and care have become more sophisticated and personalised.

The new guidance reflects these changes and shows how MDTs are at their most effective when they spend more time on the most complex cases.

The NHS Cancer Programme will now work with Cancer Alliances to make sure the new guidance is promoted and taken up across the country.

https://www.england.nhs.uk/cancer/strategy/our-governance/

The NHS Long Term Plan gives us a clear mission for improving cancer outcomes. We will only be able to deliver this by collaborating with the whole cancer family pulling together. This section provides updates on the main discussions and actions from our key governance meetings which include patient and stakeholders groups.

### **Patient and Public Voices Forum**

The Patient and Public Voices (PPV) Forum brings together patients, carers and patient representatives from across the country. They provide advice and work with the Programme team so that projects and policies meet the needs of patients. The Forum is chaired by Ceinwen Giles who is a cancer patient and Director of Partnerships and Evaluation at Shine Cancer Support. The most recent meeting of the Forum took place on 22 November and included:



#### **Skills mapping**

Forum members shared their networks, skills and interests to create a record of the experiences and expertise available to the Programme from Forum members. Posters created for each member will be put on the wall of NHS Cancer Programme Team offices so team members can know at a glance what support is on offer for their projects.

#### **Programme updates**

Members of the Programme team updated the Forum on how their feedback, views and expertise have contributed to project delivery. Specifically, this included: Rapid Diagnostic Centres (RDCs), health and wellbeing support and information and the Quality of Life Metric. The session included an introductory discussion with the new National Clinical Director for Cancer, Professor Peter Johnson.

## Faster Diagnosis Standard and the Clinically-led Review of NHS Access Standards

Forum members gave their insights on how introducing the Faster Diagnosis Standard will improve patient experience and what communications people might need about the Standard to ensure the best experience. Member feedback will be used to develop patient-facing communications as part of the upcoming formal consultation on the Clinically-led Review of NHS Access Standards, which is due in the new year.



The next Patient and Public Voices (PPV) Forum meeting will be in June.

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### **Cancer Alliance Leadership Forum**

The Cancer Alliance Leadership Forum brings together Cancer Alliance leaders to advise on the strategy for delivery of the cancer ambitions and objectives in the NHS Long Term Plan. It provides an opportunity for leaders to share and feedback ideas, successes and challenges from local implementation to support joined up working and delivery across the NHS Cancer Programme.

The Forum is co-chaired by Andrew Welch, Medical Director of Newcastle Upon Tyne Hospitals NHS Foundation Trust and Chair of the Northern Cancer Alliance, and Paula Head, Chief Executive of University Hospital Southampton NHS Foundation Trust and Chair of the Wessex Cancer Alliance. Its last meeting was on 29 November and included:

### Delivering the NHS Long Term Plan

A discussion with all parts of the NHS Cancer Programme on the challenges and opportunities we have found in delivering the NHS Long Term Plan so far and looking ahead to the next five years.

### New Multi-Disciplinary Team meetings guidance

National Clinical Director for Cancer, Professor Peter Johnson, set out the key points of the new Multi-Disciplinary Team (MDT) guidance and why new guidance is needed (see page 10 above).

#### **Cancer waiting times**

West London and Kent and Medway Cancer Alliances presented how they are working to improve 62-day performance. Other Alliances then shared what they are doing to improve operational performance ranging from implementing governance structures to developing collaborative working.

### **Collaboration with Cancer Research UK and other partners**

Cancer Research UK (CRUK) set out how they are planning to support delivery of the NHS Long Term Plan ambitions for cancer. Alliances then discussed with CRUK areas for ongoing and future collaboration.





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### **National Cancer Board**

The National Cancer Board provides strategic leadership across the NHS and its partner arm's length bodies in the delivery of the cancer ambitions in the NHS Long Term Plan. It is chaired by Cally Palmer, National Cancer Director, and brings together delivery partners from across the cancer sector. At its meeting on 18 December 2019, the Board covered topics including:



#### **Delivering the NHS Long Term Plan**

The NHS Cancer Programme Director, David Fitzgerald, updated the Board on progress delivering the NHS Long Term Plan and the upcoming priorities for delivery which include Primary Care Networks (PCNs) and Rapid Diagnostic Centres (RDCs - see page 7 above).

#### **Clinically-led Review of NHS Access Standards**

National Clinical Director, Professor Peter Johnson, updated the Board on the Clinically-led Review of NHS Access Standards and on plans to launch the Faster Diagnosis Standard in April.

#### **Be Clear on Cancer**

Dr Jem Rashbass, National Director for Disease Registration and Cancer Analysis at Public Health England, updated the Board on new governance arrangements for the Be Clear on Cancer campaign and the overall approach to awareness campaigns in 2020/21.

#### Innovation

Professor Richard Gilbertson, Chair of the NHS Cancer Programme's Expert Advisory Group on Innovation and Director of CRUK's Cambridge Cancer Centre, updated the Board on the initial progress of the group and its plans to prioritise early detection and diagnosis innovations that can be rapidly rolled out across Cancer Alliances.

### Quality of Life Metric and Personalised Care

The NHS Cancer Programme lead for personalised care updated the Board on progress made so far to ensure people have the right care and support in place for them from diagnosis to aftercare, and will be better supported to manage the impact of cancer on quality of life.

The next meeting of the Board will take place on 11 March.

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## **Charity Forum**

The Cancer Charity Forum brings together cancer charities to advise on and guide the delivery of NHS Cancer Programme work. It is chaired by Lynda Thomas, Chief Executive of Macmillan Cancer Support. The latest Forum meeting took place on 20 November 2019 and included:



#### Introduction to new National Clinical Director for Cancer

Forum members had the chance to welcome and meet the new National Clinical Director for Cancer, Professor Peter Johnson. Members heard about the priorities for his role and took part in a Q&A session.

#### **Future of Cancer Care**

Cancer Research UK's (CRUK) Head of Policy Development, Emlyn Samuel, and Strategic Project Delivery Officer, Jamie Hamilton, gave a high-level introduction to the charity's Future of Cancer Care project. The project aims to identify what the key themes will be for UK health systems and services that will shape cancer prevention, survival and clinical research in the next 20 years. The project will help support longer term thinking and planning, stimulate debate, and support the implementation of the NHS Long Term Plan and the development of future cancer strategies.

### Sharing solutions, updates and activity

A series of open table discussions took place to give members the opportunity to discuss issues relating to live concerns, focussing on key areas of work, such as early diagnosis, faster diagnosis and treatment, and personalisation of care.

Members were encouraged to move between tables to take part in discussions, share examples of work and ask questions on areas of specific interest. Feedback from the session has been shared with NHS Cancer Programme teams.

The next meeting of the Charity Forum is on 4 March 2020.

NHS England Gateway number: 001491