

Targeted Lung Health Check Overview



North East London
Cancer Alliance

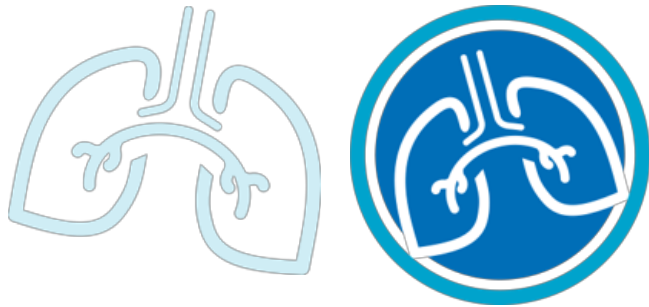


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Introduction

- **What?**

- TLHC (Targeted Lung Health Check) Programme, requirement from NHS England
- Lung cancer screening (under a different name)
- Currently a pilot project (NEL = phase 3)
- But – national lung cancer screening programme is coming, and this is seen as the foundations for that
- Significant learning from Summit Programme

- **Why?**

- Diagnosis lung cancer at an early stage, with the aim of surgical cure

- **When?**

- Start scanning July 2022
- '4 year programme' – but plans may change with national programme
- GP practice sign-up imminent & data extraction

- **Where?**

- 3 initial boroughs: Barking & Dagenham, Tower Hamlets, City & Hackney
- B&D and TH in 2022, C&H in 2023, then possible further expansion

- **How?**

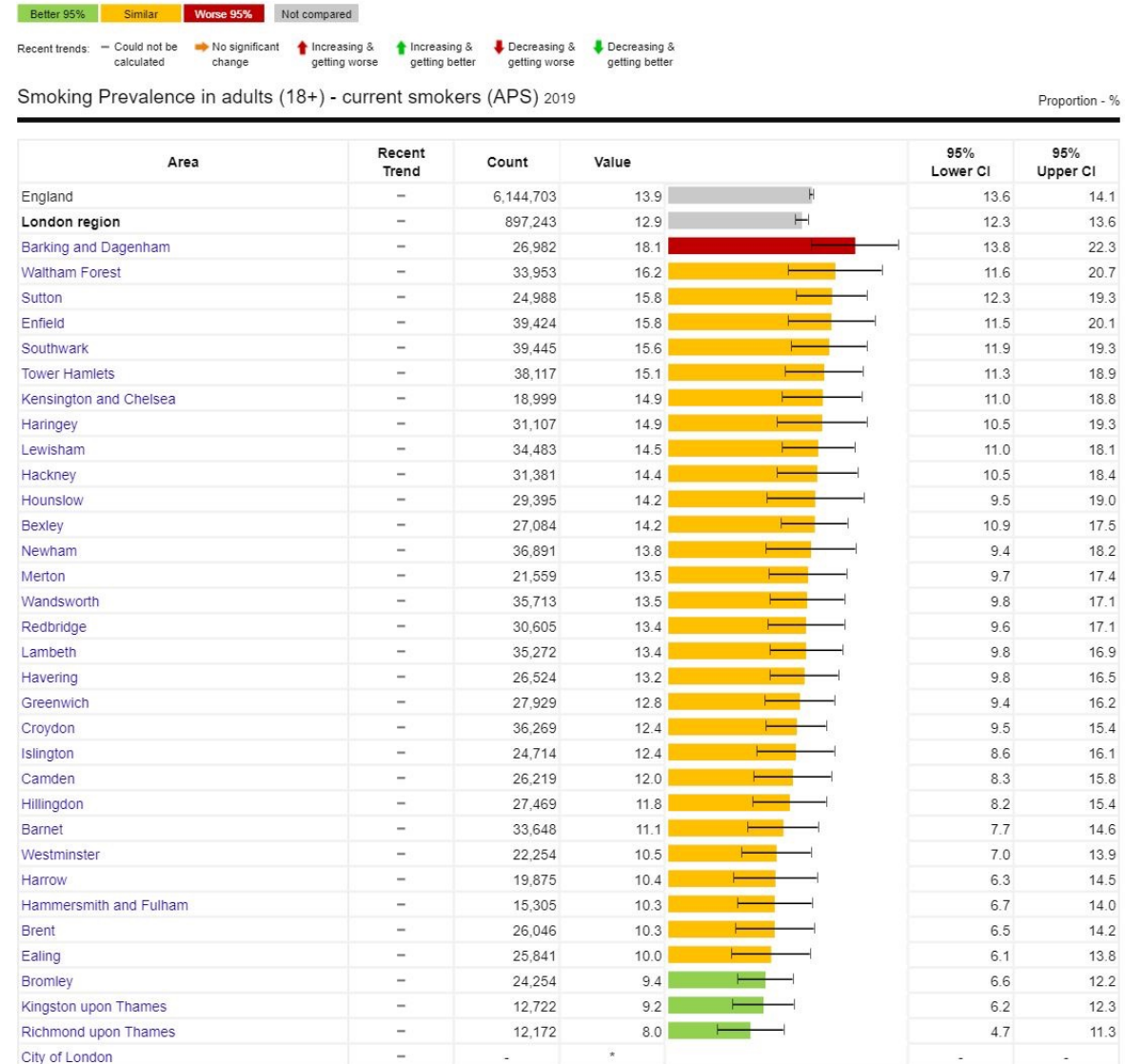
- Initial outsourcing to InHealth 'scanner in a carpark'
- Aim to bring back in house when possible

Rationale For Lung Cancer Screening

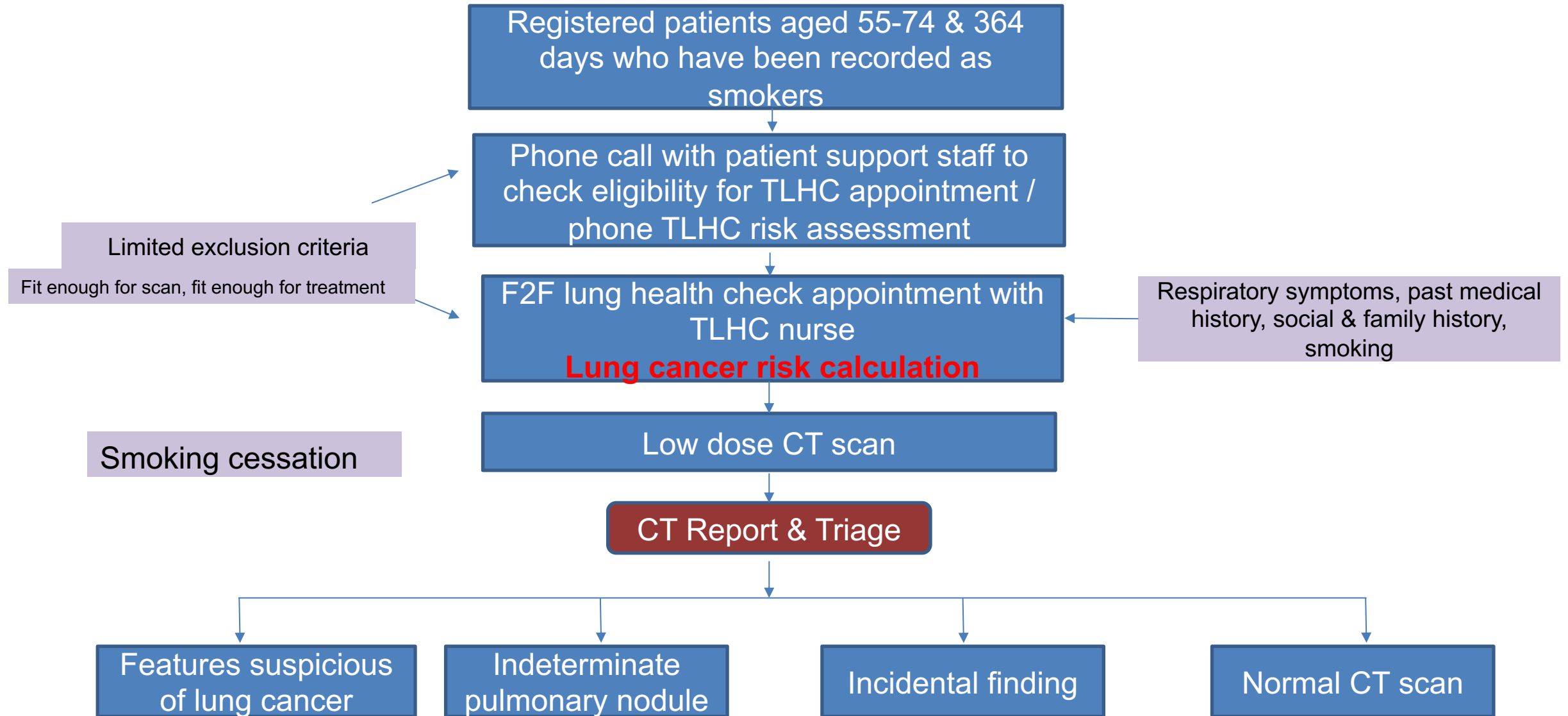
- Lung cancer is the most common cause of UK cancer mortality
 - 21% of all cancer deaths
- 48,548 new lung cancer cases were recorded in the UK in 2016-2018
 - 35,137 deaths
- Early stage diagnosis:
 - 1 year survival = 88%
 - 5 year survival = 57%
- Late stage diagnosis:
 - 1 year survival = 19%
 - 5 year survival = 3%

Smoking Prevalence

- Smoking Prevalence in NEL is 14.9%
 - This is above London (12.9%) and National(13.9%) averages
- NEL London includes the top two London Boroughs with the highest prevalence.
- Barking & Dagenham is the only London Borough where smoking Prevalence is increasing and getting worse



TLHC Pathway overview



TLHC Pathway: CT scan

- Person attends CT scanner located in a community setting
 - Site testing in progress
- Images are captured and sent through a VPN connection to InHealth and then outsourced to Heart and Lung Health for reporting
- Radiologists / Responsible Assessor will refer if something identified or determine recall timescale (3, 12 or 24 months)
- Outcome and recall dates sent to InHealth, who will issue outcome letter and send next invitation letter when recall appointment is due.



Where does it take place?

A Targeted Lung Health Check is by **invitation only** and will take place at the following locations:

Barking & Dagenham residents:

Barking Sporthouse and Gym, Mayesbrook Park, Lodge Ave, Dagenham, RM8 2JR

View the location on [Google Maps](#)

Tower Hamlets residents:

Mile End Park Leisure Centre and Stadium, 190 Burdett Rd, London E3 4HL

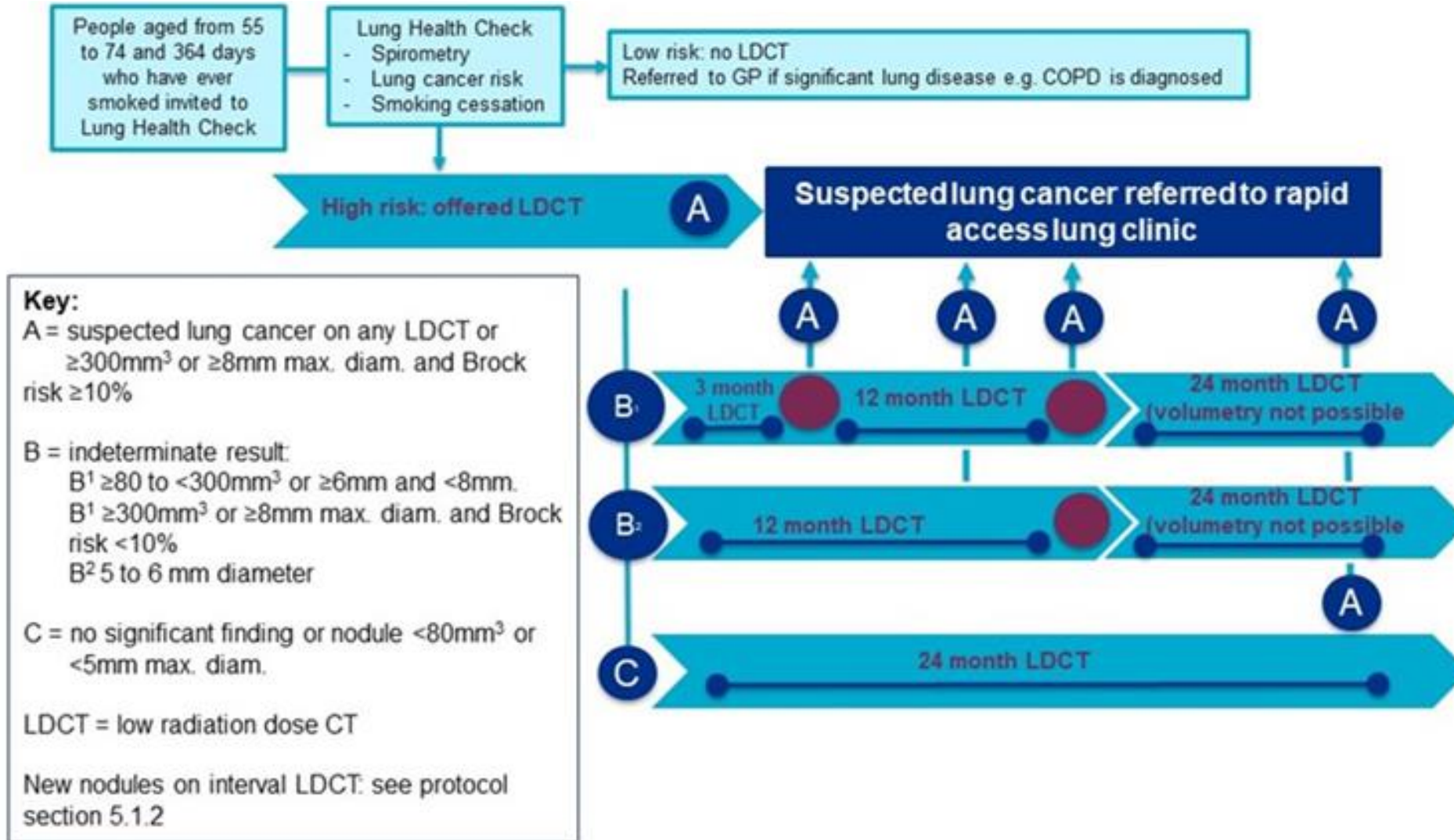
View the location on [Google Maps](#)

Risk Assessment Questions

LLPv2: $\geq 2.5\%$ risk	PLCO _{M2012} : $\geq 1.51\%$ risk
Age Gender Smoking duration (years) Previous pneumonia/ COPD/ emphysema/ bronchitis/ TB Occupational asbestos exposure Previous history of malignancy Previous family history of lung cancer; and relative's age at onset i.e. <60 y or >60 years; whether first degree relative	Age (years) Education level Body mass index COPD/ chronic bronchitis/ emphysema Personal history of lung cancer Family history of lung cancer Ethnicity ¹ Smoking status Average number of cigarettes smoked per day Duration smoked (years) Years having ceased smoking

If either cut-off score is exceeded, patient needs a CT scan

Pathway Overview



Possible review in place & some 36 month scans being planned

Pathway after CT scan performed – lung cancer pathway

Category 1 – CT scan suggestive of lung cancer

Immediate referral to rapid access lung cancer clinic

Category 2 – Indeterminate result

Second scan 3 months later, with follow up scan 12 months later

Category 3 – normal CT chest
No significant findings or nodules
< 80mm³ or 5mm max diameter

Repeat scan at 24 months

Participants leave the pathway if:

- Initial CT = lung cancer
- Follow up nodule scans stable
- Normal 24 month CT scan

- But: national discussions suggest that programme may continue long-term with ongoing follow up

Projected Numbers – Local



North East London
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	Total	Barking & Dagenham	Tower Hamlets	City & Hackney
Total eligible population	107,100	31,100	36,500	39,500
Ever smoked	49,266	14,306	16,790	18,170
Appointments booked	24,633	7,153	8,395	9,085
Non-attendees	1,971	572	672	727
LHCs performed	22,662	6,581	7,723	8,358
Positive LHCs	12,691	3,685	4,325	4,681
Excluded from CT scan	381	111	130	140
Number of initial CT scans	12,310	3,575	4,195	4,540
Indeterminate (need 2 nd scan)	1,748	508	596	645
Negative CT scan – 24 months FU needed	10,168	2,953	3,465	3,750

Projected Numbers – Local

	Total	Barking & Dagenham	Tower Hamlets	City & Hackney
People needing clinical investigation (after 1st / 3 month / 12 month scans)	726	211	248	268
Cancers found	369	107	126	136
Number needing investigation after 24 month scan	244	71	83	90
Cancer found at 24 months	160	46	54	59
Total Lung Cancer	529	154	180	195

TLHC vs Summit Programme

- Significant learning from Summit experience
- Aim to be as similar as possible & not duplicate work
- Summit was a trial, TLHC is a pilot programme
- TLHC = ask by NHS England
- Attempts to align with North Central Cancer Alliance for TLHC programme unsuccessful for various reasons
- Fine tuning of programme in progress, but basic aim is that we want to include people who were involved in Summit, but they may be 'realigned' in the programme to ensure appropriate scanning intervals
- Sentence to be added to invitation letter to reflect this
- i.e. – no filtering of these patients from GP practice, we will do that later

- **Awareness** of pilot in case patients ask about it – comms team will make sure all practices have information
- **Letters**
 - Letters are all sent centrally (invitation letters and results), results copied to GP
 - GP endorsement of programme mentioned on letter
 - ‘We are working with your GP and NHS England’
 - Central booking line contact details on letter
 - Website link on letter
 - Results letter also has contact details
- We also plan to have locally based admin / nursing support, with separate contact details

- **Data sharing**
 - Managed by InHealth
 - DPIA agreement being discussed at Cancer Alliance 27/4/22
 - Work with local GP Practices and Commissioners to identify eligible patients and export relevant data to enable invitation process and support triage questions.
 - Less laborious than Summit data extraction
- **Export:**
 - Demographic data e.g. NHS number, name, date of birth, address
 - Administrative data e.g. ethnic group, main spoken language
 - Height, weight and BMI
 - Smoking Status e.g. description of earliest and latest & dates
 - Cancer history – personal and family
 - Respiratory diagnoses e.g. COPD, Asthma, Emphysema, etc.

▪ Results

- All results / letters shared with GP and patients
 - Urgent phone call to patients if urgent findings, by TLHC nurse, immediate appointment arranged in secondary care, no need for additional referral
 - Otherwise by letter
- Cancers and other incidental findings will be referred by TLHC programme to appropriate secondary care services
- Nodules will be followed up as part of the TLHC programme
 - Transferred to secondary care if need ongoing monitoring after TLHC programme finishes

• Incidental findings

- Protocols being drafted
- To be shared with primary care teams in due course
- TLHC team will co-ordinate most via secondary care i.e. direct referrals
- Significant efforts to limit impact on primary care
- Mainly coronary artery calcification / aortic valve disease / osteoporosis

Engagement with GPs and LMCs

- Meetings with GP leads and LMCs
- Presentations at GP networks / PCN meetings
- Comms to all GPs via primary care updates, bulletins and intranet
- FAQs, toolkit and resources shared via a website

Awareness and engagement campaign

- Starting from March onwards
- Creating awareness of lung health check so no surprises when receive letter
- Using mix of online and offline media
- Engagement with football clubs, faith networks, community and voluntary organisations
- Paid advertising
- Video and patient leaflets, hosted on a website (shared with North Central London)

Support throughout the pathway

- Letters to patients, booklets and additional material as required, including easy read versions and translations

Web pages

- <https://www.eastlondonhcp.nhs.uk/aboutus/targeted-lung-health-check-copy.htm>

Contact Details

InHealth Support Desk email for GP ISA
queries: supportdesk@health-intelligence.com

Telephone number for **patients** to call for changing of
appointments and further information: 020 3839 8911

If you require any further support with signing up and using the
Data Console Controller, please see link here
<https://app.datacontroller.org.uk/learning> and
<https://app.datacontroller.org.uk/learning/downloadDocument?documentId=26aa0fbd-e4f8-48ef-bfca-ced47791d5d7>

Targeted Lung Health Check Team:
nelondon.lungcheck@nhs.net or visit our [web pages](#)

