

Practical Support and Guidance for delivering the Early Diagnosis PCN DES and Quality Outcome Framework for Cancer across North East London

This document sets out local programs and initiatives that can support you with the requirements in the DES and QOF. This document should be used in conjunction with the PCN DES [NHSE support pack](#) published in April 2023 and the QOF guidance [Quality and Outcomes Framework 2023/24](#).

The CRUK GP Contract Hub has key information about the new requirements, including a summary on what GPs and PCNs need to do for 2023/24 and ideas on how to get started. You will find evidence-based practical resources, case studies and more to support you. [Delivering the Primary Care Network \(PCN\) service specification on early cancer diagnosis 2023/24 | Cancer Research UK](#)

DES Ref.	Requirement	IIF	Information and guidance available in NEL
8.5.1	A PCN is required to:		
a	review referral practice for suspected and recurrent cancers, and work with its community of practice to identify and implement specific actions to improve referral practice, particularly among people from disadvantaged areas where early diagnosis rates are lower.		<p>All Boroughs</p> <ul style="list-style-type: none"> PCN Dashboard launched in 2021 and includes 12 indicators for early cancer diagnosis. Click the link to register for access to the PCN dashboard. Register NHS England applications (model.nhs.uk) Fingertips PHE data (latest data 2021/22) – here Undertake a review of routes to diagnosis for people who have received a cancer diagnosis and ensure findings are shared within your teams. <ul style="list-style-type: none"> Clinical Effectiveness Group (CEG) Cancer patient analysis trigger tool available for EMIS and SystemOne users is a local tool developed to review recent cancer diagnosis within practice to reflect on any avoidable delays. Cancer toolkit - Clinical Effectiveness Group (gmul.ac.uk) CRUK have a template practices can use for continuous audit between national cycles. National Cancer Diagnosis Audit Cancer Research UK Review suspected cancer referral data for a specific cancer group, and review practice for any with very low/high referral rates.

Published: July 2023
Review date: September 2023
Version: 1.0

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| | | | <ul style="list-style-type: none"> • Undertake learning event analysis (e.g. for later stage presentations or those diagnosed via A+E) using the Macmillan toolkit Learning event analysis (LEA) toolkit for early cancer diagnosis Macmillan Cancer Support Macmillan have also developed a simpler template which can be found here. • Urgent Suspected Cancer/2WW referral forms (<i>Updated in 2023</i>) <ul style="list-style-type: none"> ○ For EMIS practices, CEG have developed a shortcut key for practices to access the most up-to-date suspected cancer referral forms. <i>Find out how to install and use the shortcut key in this short video:</i> How to launch referral forms using the F12 key - YouTube ○ For practices with Resource Publisher, the most up-to-date suspected cancer referral forms are on the RP Platform. These were updated in January 2023. Changes to Urgent Suspected Cancer (2 Week Wait) referral forms North East London Cancer Alliance (nelcanceralliance.nhs.uk) ○ Each new form has a very useful educational tumour summary Educational support - Transformation Partners in Health and Care • Safety netting systems review - have a consistent approach in monitoring and following up patients who have been referred urgently for diagnostics/tests (e.g., FIT tests given out), suspected cancer, follow up of worrying symptoms or those with a FIT score below 10 that you may wish to review. <ul style="list-style-type: none"> ○ Use EMIS/Macmillan Electronic safety netting toolkit/local template - Safety netting in primary care consultations - Macmillan Cancer Support ○ CRUK safety netting workbook ○ CEG Cancer prevalent improvement search can be used to identify patients who have been missed. The searches are published in the CEG practice support folder for every North East London locality - the majority are in Folder 4. • Gateway C Module 'Improving the quality of your referral' Encourage practice staff to complete the free module Improving the Quality of Your Referral - GatewayC |
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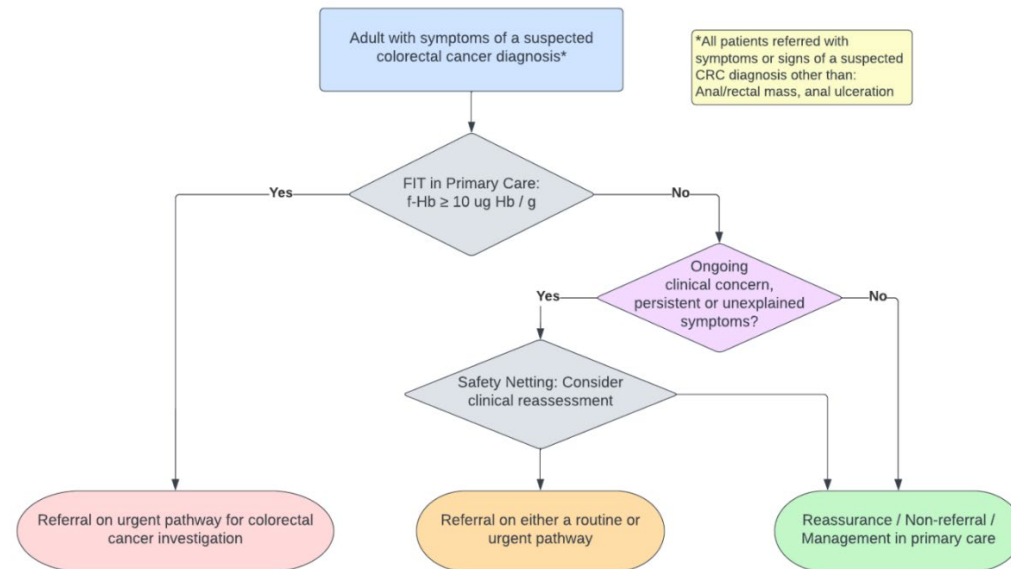
b	<p>Work with local system partners – including the NHS England Regional Public Health Commissioning team and Cancer Alliance – to agree the PCN’s contribution to local efforts to improve uptake in cervical and bowel NHS Cancer Screening Programmes and follow-up on non-responders to invitations. This must build on any existing actions across the PCN’s Core Network Practices and include at least one specific action to engage a group with low participation locally.</p>	<p>All Boroughs</p> <ul style="list-style-type: none"> • The CEG Cancer Screening dashboard displays data for bowel, breast, and cervical cancer screening. View data by practice, Primary Care Network, Borough or whole North East London region. North East London primary care or local authority teams should speak to their practice managers or local CEG facilitator for the link and login details. • CEG searches: Cancer screening V3 searches recall letters for Bowel, Breast and Cervical, for additional support contact your primary care facilitator at CEG. • Bowel screening kit request form for practices to request replacement kits on behalf of patients who are vulnerable or unable to self-request can be found on the alliance webpage. For more information contact: <ul style="list-style-type: none"> ○ NHS Bowel Cancer screening Health improvement specialist leena.khagram@nhs.net for Newham, Tower Hamlets, Waltham Forest and City & Hackney ○ NHS Bowel Cancer Screening Health Improvement specialist phillippa.hickey1@nhs.net for Barking, Havering and Redbridge University Hospital NHS Trust • CRUK Bowel Cancer screening resources can be found here • Information for patients with learning disabilities and autism <ul style="list-style-type: none"> ○ https://northeastlondonccg.nhs.uk/your-health/learning-disabilities-and-autism/cancer-screening/ ○ https://northeastlondonccg.nhs.uk/your-health/learning-disabilities-and-autism/ • The Cancer Alliance webpage has a range of resources developed to support our local populations Screening North East London Cancer Alliance (nelcanceralliance.nhs.uk)
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C	Work with its Core Network Practices to adopt and embed:		
i	The requesting of FIT tests where appropriate for patients being referred for suspected colorectal cancer.	CAN-02	<p>All Boroughs</p> <ul style="list-style-type: none"> • For IIF indicator CAN-02, the window for recording a FIT test result is up to 21 days prior to an urgent suspected cancer (2WW) referral. FIT results recorded after referral will not count towards your achievement. To code FIT test automatically, associate the SNOMED code with incoming FIT results instructions How-to-associate-a-code-with-incoming-FIT-results-in-EMIS.pdf (qmul.ac.uk) • However, delaying a referral for suspected cancer until the FIT test is back relies on practices having very firm safety netting processes in place. We suggest you discuss these processes internally at your practice now. Here are some of the CEG resources that can help Cancer Toolkit • Encourage patient uptake of FIT, make sure patient is aware of the importance of urgency of returning kit - send text message reminder via accuRx with links: <ul style="list-style-type: none"> ○ Patient information leaflet in 12 languages found here (bottom half of page) ○ FIT animation in various languages found here ○ CRUK FIT Infographic found here • New BSG guidelines on how to use FIT Faecal immunochemical testing (FIT) in patients with signs or symptoms of suspected colorectal cancer (CRC): a joint guideline from the Association of Coloproctology of Great Britain and Ireland (ACPGBI) and the British Society of Gastroenterology (BSG) - The British Society of Gastroenterology • A 30-minute webinar about the new guidance is available to watch online. 30 Minute FIT Guidelines Webinar

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FIT Flowchart



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Where available and appropriate, the use of teledermatology to support skin cancer referrals (teledermatology is not mandatory for all referrals).

All Boroughs

- See the [guidance published by the British Association of Dermatologists and the NHS](#) on new models of service for teledermatology. See also the [best practice timed pathway for skin referrals](#).
- The updated PAN-London referral guidance for skin can be found here [PowerPoint Presentation \(transformationpartnersinhealthandcare.nhs.uk\)](#)
- Consider an audit of dermatology referrals and review where the use of A&G or teledermatology may have been useful.

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		<ul style="list-style-type: none"> • The Gateway C team are pleased to announce that we have a new course ‘Skin Cancer – Early Diagnosis’ available to all healthcare professionals on GatewayC. • RCGP learning resources for general dermatology Dermatology toolkit: Learning resources for general dermatology (rcgp.org.uk) <p>TNW</p> <ul style="list-style-type: none"> • Barts Health NHS Trust and NEL ICB are offering an online course on skin cancer diagnosis for salaried GPs. It is currently only available for up to 60 GPs in the TNW area, subject to evaluation before wider roll out. Any enquires please email: ifeoma.oyelami@nhs.net or anwar.miah@nhs.net • Medical photography is being piloted at Whipps Cross hospital. <p>BHR</p> <ul style="list-style-type: none"> • Medical photography is being piloted at Queens hospital. <p>C&H</p> <ul style="list-style-type: none"> • Audit use of teledermatology for routine referrals only – C&H referral pathway here
d	<p>Focusing on prostate cancer, and informed by data provided by the local Cancer Alliance, develop and implement a plan to increase the proactive and opportunistic assessment of patients for a potential cancer diagnosis in population cohorts where referral rates have not recovered to their pre-pandemic baseline.</p>	<p>All Boroughs</p> <ul style="list-style-type: none"> • The Pathology Labs at Barts Health and BHRUT have updated the PSA age-adjusted ‘acceptable’ ranges to align with the newly updated PAN London referral guidance USC-urological-cancer-clinical-guide.pdf and NICE NG12 Prostate Cancer guidance for PSA testing. Please ensure that you are using the correct PAN-London referral forms. • Information from CRUK on prostate cancer risk including statistics on incidence and survival Prostate cancer risk Cancer Research UK • Prostate Cancer UK delivering the PCN DES toolkit Delivering the PCN DES for prostate cancer Prostate Cancer UK

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			<ul style="list-style-type: none"> • Raise awareness of those at higher risk – FH, Black-African, Older men – amongst clinicians and patients. The alliance has developed the Its not a game campaign to raise awareness. • NEL Cancer Alliance are working with the Expert Reference Group for Urology to help identify those at higher risk of prostate cancer. To find out more or to get involved please email nelondonicb.nelcanceralliance@nhs.net
E	<p>Review use of their non-specific symptom pathways (NSS), identifying opportunities and taking appropriate actions to increase referral activity.</p>		<p>All Boroughs</p> <ul style="list-style-type: none"> • Multidisciplinary Rapid Access Clinic (Barts MDRAC), 2ww service for people with non-specific symptoms that could indicate cancer – information including the referral form and Patient information leaflet here • Rapid Diagnostic Clinic (BHRUT RDC) if you would like to discuss a patient prior to referral, or would like any further information, email: bhrut.rapiddiagnosticcentre@nhs.net – more information including the referral form and Patient information leaflet here • CRUK resources available such as the NICE (NG12) symptom reference guide infographic found here and NICE (NG12) interactive desk easel can be found here • Gateway C have an online training module Course Now Live: Non-Specific Symptoms - GatewayC and NG12 mind maps found here <p>C&H</p> <ul style="list-style-type: none"> • Review practice use of direct access CT chest abdo pelvis – pathway here For patients >50y with persistent unexplained weight loss

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QOF Ref.	Requirement	Points	Information and guidance available in NEL
CAN 001	The contractor establishes and maintains a register of all cancer patients defined as a 'register of patients with a diagnosis of cancer excluding non-melanotic skin cancers diagnosed on or after 1 April 2003'	5	Information and guidance will be made available in September 23 update.
CAN 004	The percentage of patients with cancer, diagnosed within the preceding 24 months, who have a patient Cancer Care Review using a structured template recorded as occurring within 12 months of the date of diagnosis	6	<p>A Cancer Care Review (CCR) is a quality conversation between a patient and their GP or Practice Nurse about their cancer journey. It is essential to personalised care and helps patients to:</p> <ul style="list-style-type: none"> • Talk about their cancer experience and any concerns or unmet needs they may have • Understand what support is available in their community. • Receive the information they need to begin supported self-management. <p>Online Training Personalised care planning for people with cancer - Overview (guyscanceracademy.co.uk)</p> <p>Carrying at an effective CCR – Tips sheet https://www.macmillan.org.uk/images/carrying-out-an-effective-ccr_tcm9-297613.pdf</p> <p>Macmillan: Support for primary care https://www.macmillan.org.uk/about-us/health-professionals/resources/resources-for-gps.html</p> <p>CEG LTC Template – has an embedded Cancer specific page which guides a quality CCR and within this are the embedded codes for both the 3 month contact and Cancer Care Review.</p> <p>Macmillan has also integrated a national Cancer Care Review template in to the three core GP IT Providers (EMIS Web, TPP SystemOne and INPS Vision) to encourage a standardised, holistic, person-centred approach to these conversations.</p>

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			<p>The QoF guidance for 23/24, states that practices should use a template to facilitate effective CCR conversations (CEG LTC Cancer template can also be used)</p> <ul style="list-style-type: none"> • Further information on how to access the template within each IT system is included on the CCR Webpage • Macmillan is currently working with the core GP IT providers to update the template in line with the new and updated indicators and recently released SNOMED coding. These updates will be released automatically within each IT system. • Macmillan has worked with accuRx to develop a Cancer Florey, which can act as a pre-CCR questionnaire to be sent to the patient via SMS ahead of their CCR conversation. By completing this short questionnaire, the patient will be able to indicate areas of concern that can then be prioritised within the CCR appointment. This florey is now live, for more information on how to access floreys within accuRx click here. • Some patients may prefer a paper format “concerns check list” which can be given pre their CCR appointments to aid in establishing their priorities which can be found here.
CAN 005	The percentage of patients with cancer, diagnosed within the preceding 12 months, who have had the opportunity for a discussion and informed of the support available from primary care, within 3 months of diagnosis	2	<p>Primary care teams are now required to connect with patients within 3 months of their diagnosis and inform them of the support available – e.g. via a call, text or letter. Macmillan have produced some helpful resources for this (scroll down to “supporting patients after a cancer diagnosis”).</p> <p>Cancer Care Reviews in Primary Care Macmillan Cancer Support</p> <p>This is separate to the Cancer Care Review within 12 months.</p>

Useful Contacts		
North East London Cancer Alliance	nelondon.nelcanceralliance@nhs.net	Group Mailbox
CEG Clinical Cancer Facilitator	k.d.bhuruth@qmul.ac.uk	Karishma Bhuruth
PCN Cancer Facilitator (Tower Hamlets & Waltham Forest)	lubna.patel6@nhs.net	Lubna Patel
PCN Cancer Facilitator (Newham and City & Hackney)	jessica.lewsey@nhs.net	Jessica Lewsey
PCN Cancer Facilitator (Barking, Havering and Redbridge)	naeema.akther@nhs.net	Naeema Akther
GP Lead, Cancer Alliance	robert.palmer@nhs.net	Dr Rob Palmer
Barking and Dagenham GP Cancer Lead	amitsharma1@nhs.net	Dr Amit Sharma
Havering GP Cancer Lead	Vacant	Vacant
Redbridge GP Cancer Lead	siva.ramakrishnan@nhs.net	Dr Siva Ramakrishnan
City & Hackney GP Lead	reshma.shah1@nhs.net	Dr Reshma Shah
Newham GP Cancer Lead	helen.stedeford@nhs.net	Dr Helen Stedeford
Waltham Forest GP Cancer Lead	shahbazkang@nhs.net	Dr Shaz Kang
Tower Hamlets GP Lead	t.anastasiadis@nhs.net	Dr Tania Anastasiadis
Programme Lead, Early Diagnosis, Cancer Alliance	caroline.cook9@nhs.net	Caroline Cook
Primary Care Programme Manager, Cancer Alliance	saira.parker-deeks@nhs.net	Saira Parker-Deeks
Project Manager, Early Diagnosis, Cancer Alliance	dimple.makwana@nhs.net	Dimple Makwana

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Quick Links to Website Resources	
CEG Resources	Cancer diagnosis and care - Clinical Effectiveness Group (qmul.ac.uk)
NEL Cancer Alliance Website for Primary Care	https://www.nelcanceralliance.nhs.uk/primary-care
Pan London Referral Forms for Suspected Cancer	Pan-London suspected cancer referral forms - Transformation Partners in Health and Care Partnership
New joint guidance on FIT	Faecal immunochemical testing (FIT) in patients with signs or symptoms of suspected colorectal cancer (CRC): a joint guideline from the Association of Coloproctology of Great Britain and Ireland (ACPGBI) and the British Society of Gastroenterology (BSG) - The British Society of Gastroenterology
Macmillan's Cancer Care Reviews Resource	https://www.macmillan.org.uk/healthcare-professionals/cancer-pathways/prevention-and-diagnosis/cancer-care-review
Concerns checklist for patients to prepare for CCR (printable):	https://be.macmillan.org.uk/Downloads/ResourcesForHSCPs/MAC13689ConcernsChecklist17AWweb.pdf

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