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Faecal Immunochemical Testing Resources

As discussed in previous PCN Leads Sessions, the BSG guidance states that **ALL suspected cancer referrals for the lower GI pathway must be accompanied by a positive FIT result.** This is in line with national planning guidance for 2022-23. These changes are now in effect and referral forms have been revised to reflect this.

There is a national reporting process for adherence to this guideline.

Secondary care colleagues have been asked not to reject any lower GI referrals **BUT** it is very important to undertake these tests and ensure referral criteria are met. If there are any issues with rejected referrals, please contact Ali Jones (alison.jones8@nhs.net), Sarah Taylor (sltaylor@nhs.net) and/or Lauren Kelly (lauren.kelly47@nhs.net).

An email has been sent to all PCN Cancer Leads including resources for you to share with practices in your PCN to support this change

Managing Mastalgia (Breast Pain)

Breast pain alone, with **no red flag symptoms**, does not indicate breast cancer. A published cohort study of women in South and Central Manchester, has shown that the incidence of breast cancer in women with breast pain alone (without red flag symptoms) is **0.4%**.

This is less than we would expect in asymptomatic women as the incidence in the national screening programme is **1%**.

Red flag symptoms: breast or axillary lump, skin tethering/puckering, peau d'orange, new nipple inversion, pathological nipple discharge (unilateral, clear or blood-stained).

Management: exclude non-breast causes (musculoskeletal e.g. costochondritis, respiratory, cardiac), reassure and advise a well-fitted bra and topical NSAIDs for 6 weeks.

If pain persists despite treatment and reassurance, consider referring **non-urgently** to breast clinic (non-2ww) using your standard routine referral pathways.

Click the links below to access useful resources:

[Management of Mastalgia Pathway decision making algorithm](#)

[You can also watch this helpful 10 minute video](#)

Further information:

[NICE Guidance/ NHS Patient Information](#)

For further information and education please visit:

www.gmcancer.org.uk/breast

Suspected Cancer Referral Form Annual Review – NEW FORMS

As you will be aware the suspected cancer referral forms are reviewed annually in line with NICE guidance.

There have been some changes to the mandatory questions on all forms in line with the clinical advice from the GM Cancer Pathway Boards and Clinical Leads.

The forms have been shared with the Data Quality Team for installation in all practices throughout February 2023.

GM GPs are asked to ensure that referrals for suspected cancer are made using the standardised GM referral forms and that no previous forms are saved separately and used, as this impacts on secondary care colleagues' ability to effectively clinical triage referrals.

Update on Prostate Searches

The GP system search for “Males with a Family History of Prostate Cancer” has been amended and uploaded onto GP systems in all practices across GM. Thank you for your patience whilst this search was being amended – this search is now ready to use to contact patients for a PSA counselling invitation in line with your practice’s capacity.

Our next bulletin will have more information regarding the GM-wide PSA counselling and testing mobile van. Please join our webinar on this topic too on 22nd February.

Cervical Screening Data for Practices

GP practice teams can view their quarterly screening coverage figures for Quarter 2, 2022-23. This will help identify the eligible screening cohort who have not had engaged in the cervical screening programme in each practice.

[Cervical Screening Programme - Coverage Statistics \[Management Information\] - NDRS \(digital.nhs.uk\)](#)

PCN Early Cancer Diagnosis DES - Activity Update and Support Payment

Thank you to all the PCNs who have returned their update. We have received updates from over 70% of all PCNs.

Invoices for the support payment should include the narrative – Cancer Lead Role 2022-23 (PCN Name, Name of Lead) and be billed on headed paper to: The Christie NHS FT, Finance Department, Wilmslow Road, Withington, Manchester, M20 4BX. Invoices may be emailed to: christie.invoices@nhs.net

GM Cancer Alliance Comms Request for PCNs

The comms team at the Greater Manchester Cancer Alliance are keen to link up with those responsible for cancer comms within the PCNs. A large focus of their work is supporting the early diagnosis of cancer programme, and we may be able to provide you with resources that are helpful. We also produce a monthly campaigns calendar, linking to all the latest cancer campaign resources available each month.

If you’re responsible for the cancer comms in your PCN please get in touch via alison.foxley4@nhs.net

If you’d like to be added to the distribution for our monthly campaigns calendar please contact katie.galvin1@nhs.net

Coming soon....

- ✓ PCN Cancer Leads Session – 28th of February
- ✓ National Prostate Case-Finding Project – Mobile van launching on 3rd April
- ✓ **Bowel Cancer Screening** – 20th February – national launch of updated bowel cancer screening campaign – will be available from the campaign resource centre

What's Next?

Any feedback or queries please direct to:

Gmcancer.earlydiagnosis-primarycare@nhs.net; Alison.Jones8@nhs.net; SLTaylor@nhs.net



Prostate Cancer and Homelessness Webinars

The upcoming GM Live lunch time webinars are:

- [Prostate Cancer](#), 22nd of February, 1:00-1:30 with Dr Liam Hosie and Mr Sotonye Tolofari
- Homelessness and Cancer, 8th March, 1:00-1:30 with Dr Wan-Ley Yeung

The Fast Facts and Infographics following these webinars will be produced and uploaded onto: [Primary care education and resources - Greater Manchester Cancer \(gmcancer.org.uk\)](#)

GM Cancer Alliance and Primary Care: Ambitions for Early Diagnosis 2023/24

Early Cancer Diagnosis is a priority in the planning guidance for 2023-24. As a result, the Cancer Alliance have been allocated funding to take forward projects to support the achievement of 75% stage 1 and 2 diagnosis by 2028.

GM Cancer Alliance will be hosting a face to face all-day event on **March 7th 2023**. This will be an interactive event and will provide you with an opportunity to contribute to and help shape our work for 2023/24. The day will also include a demonstration of the **Think Cancer - Clinical Decision Support Tool**. Attendees will be able to use and comment on the tool. An agenda will follow shortly

To support attendance at the event, a financial contribution of £250 will be made available to attending GPs. The venue will be The Studio, Manchester, 51 Lever Street, M1 1FN.

Please sign up using the Eventbrite link: [GM Cancer Alliance and Primary Care : Ambition for Early Diagnosis 2023/24 Tickets, Tue 7 Mar 2023 at 09:30 | Eventbrite](#)

GMSS Data Quality January Newsletter

The GMSS Data Quality team has produced a newsletter detailing the data support, including searches they are providing for PCNs.

Please see attached newsletter and contact gms.dataqualitygm@nhs.net for any further queries.

Data Quality Cancer Newsletter – January/ February 2023

CLINICAL DECISION SUPPORT TOOL – THINK CANCER

The DQ Service has developed a clinical system tool that will prompt healthcare professionals to Think Cancer should any symptoms associated with Cancer be entered in a patient record. The tool is currently being piloted across volunteer sites in GM and will be further enhanced based on feedback.

The team will then be installing the tool across all sites in GM by the required deadline of 31st March 2023.

TOOLS INSTALLED FOR PRACTICE USE

Cancer Diagnosis – No Fast Track Referral

Searches were produced on behalf of the GM Cancer Alliance to identify number of patients with a Cancer diagnosis that do not have a fast-track referral coded in their record up to 6 months before the date of diagnosis. Practices were advised to review these patients/records to improve referral practice.

Network Contact DES

Searches have been created to support the Cancer requirements of this DES, i.e. Lower GI / Colorectal Fast-track referrals with a FIT result in the relevant timeframe.

Suspected Cancer Referral Forms & Patient Letters

Suspected Cancer Referral forms have been created and installed with corresponding patient information letters / translated letters which auto-populate with relevant demographic and clinical information. The process has been simplified to guide healthcare professionals through the referral process and automatically file the correct coding into the patient record.

TOOLS IN DEVELOPMENT

Case Finding

Searches to identify patients with associated codes or medication but no diagnosis of Cancer will be developed for practices to work through and code accordingly, if applicable.

In addition, the following searches will be created to accompany the suite of case finding searches:

- Abnormal results, no follow-up
- Fast-track referral with no patient letter given
- Patient letter given with no fast-track referral

REGULAR QUARTERLY DATA EXTRACTIONS

Cancer Care Reviews

The NHS Christie Foundation Trust has requested that the following data is extracted from GP systems across GM following a pilot in Bury, Oldham, Tameside, Salford and Stockport which

monitored if the funding of the Cancer Care Co-ordinators across 10 PCNs improved patient care and satisfaction. The data being extracted is listed below and is not patient identifiable:

Total Practice Population, QOF Indicators (Registers, Denominators and Numerators): CAN001, CAN004, CS005, CS006, broken down by: Practice Postcode, Ethnic Origin, LD Register, MH Register

Data is submitted on a quarterly basis to:

Dr Steve Churchill, (he/him)

GPwSI and Clinical Research Physician in Medical Oncology - The Christie NHS Foundation Trust

Primary Care Clinical Lead for Personalised Care - Greater Manchester Cancer Alliance

Clinical Lecturer & Academic Advisor - University of Manchester

Salaried GP - Bodmin Road Health Centre

steven.churchill1@nhs.net

Prostate Searches

As part of the PCN DES, each PCN is required to develop and implement a plan to increase the proactive and opportunistic assessment of patients for a potential prostate cancer diagnosis in population cohorts where referral rates have not recovered to their pre-pandemic baseline. The DQ Service has created some searches to support your practice / PCN with this requirement.

Data is sent on a quarterly basis to:

Alison Jones

Director of Cancer Commissioning and Early Diagnosis, Greater Manchester Cancer Alliance

alison.jones8@nhs.net

&

Philip Graham

Business Intelligence Manchester, The Christie NHS Foundation Trust

philip.graham5@nhs.net

Screening Searches (Breast / Bowel / Cervical)

National planning guidance requires Cancer Alliances to support PCNs with the delivery of the Early Cancer Diagnosis DES. The extract of the cancer screening programme searches will enable support to be targeted and will inform the GM level work on this DES requirement. Only total figures will be shared – not any patient level detail.

Data is sent on a quarterly basis to:

Alison Jones

Director of Cancer Commissioning and Early Diagnosis, Greater Manchester Cancer Alliance

alison.jones8@nhs.net

&

Philip Graham

Business Intelligence Manchester, The Christie NHS Foundation Trust

philip.graham5@nhs.net

Tele-Dermatology Searches

The NHSE/I Cancer Programme team require data from all Cancer Alliances to show the proportion of cancer referrals made using tele-dermatology. The collection and reporting of this data will also enable the Cancer Alliance to support Practices and PCNs with the work on tele-dermatology as detailed in the PCN Early Cancer Diagnosis DES specification. The searches will be installed, and data extracted (figures only) to provide to the GM Cancer Alliance.

Data is sent on a quarterly basis to:

Alison Jones

Director of Cancer Commissioning and Early Diagnosis, Greater Manchester Cancer Alliance

alison.jones8@nhs.net

&

Philip Graham

Business Intelligence Manchester, The Christie NHS Foundation Trust

philip.graham5@nhs.net

Data Quality Support

If you require any DQ advice in relation to the items above, please contact the following email address. The account is monitored daily.

gms.dataqualitygm@nhs.net