



# Leeds Cancer Programme



Transforming  
cancer care  
together

**Welcome to the Spring 2019 edition of our Leeds Cancer Programme briefing. Our dynamic programme is really making an impact across Leeds and we are committed to working in partnership to transform cancer care in Leeds. The aim of this newsletter is to update you on our progress and projects so far. Leeds Cancer Programme is an ambitious partnership between the NHS in Leeds, Macmillan Cancer Support and Leeds City Council.**

## Joanna Bayton-Smith, Macmillan Programme Manager



Joanna Bayton-Smith

Our Leeds Cancer Programme delivery team is now fully resourced with successful appointments to all work stream leads, communications, engagement and project support. Through our communications work, we have raised the profile of our partnership work at a city-wide, regional and national

level. Through our engagement work, we have identified the need to further consult with patients and public to ensure we truly reflect the needs of our local communities to design and shape services around them.

In late November last year we held a celebration event to mark 18 months of the Leeds Cancer Programme and took a moment to reflect and have pride in how much has been achieved to date with city-wide partners to improve cancer care for people in Leeds. Attendance included partners and colleagues from health, charity and voluntary sectors and we were able to share our achievements and identify priorities for the programme for the next 18 months until March 2020.

Over the last six months we have increased our focus on working with our primary care colleagues to deliver and develop a service working model through localities of General Practices and the emerging Local Care Partnerships infrastructure in Leeds. Looking at cancer data at a local, more granular level has enabled us to focus on the needs of individual communities, such as improving screening uptake and supporting people living with and beyond their cancer. In our ambition to develop tailored models of care to support specific communities, we have attracted further funding to enable reaching out to individuals who would not usually engage in more traditional cancer services. To compliment this we have funded a dedicated post within primary care to ensure primary care is supported to embed the new pathways and processes implemented by the Leeds Cancer Programme.

Looking to the next phase of the Programme, we are exploring options to develop and deliver cancer awareness and education training to healthcare professionals across Leeds. We will develop this with the ambition that all healthcare staff will have access to cancer care education and awareness resources and materials to support them working with the people of Leeds and ultimately the work of the Leeds Cancer Programme.

## Prevention, Screening and Awareness work stream update, Louise Cresswell, Public Health Specialist, (Cancer)



Louise Cresswell

Through our prevention work we have commissioned **Cancer Awareness Sessions** to support people to make healthy lifestyle changes. We held two events in March to support our work.

As part of our awareness work we continue to deliver awareness of cancer sessions

with **Leeds Cancer Awareness Service** commissioned by Public Health at Leeds City Council. The service targets deprived areas of Leeds and specific groups such as Gypsy/Roma Travellers, BME groups and men, as we know that awareness and uptake of screening is lower in these communities. Since April 2018 the service has achieved 143 awareness raising events, recruited 42 local volunteers and had 4,673 advice conversations.

As we strive to ensure more screening uptake we have identified 50 GP practices in the most deprived areas of Leeds where uptake of screening for bowel cancer is much lower. These practices have been provided with a **"Bowel Screening Champion"** who target non-responders to encourage them to take the screening test. Since June 2018 4,311 people have been followed up by screening champions, 713 went onto complete the test. Following on from this result, we will continue the bowel screening initiative for 2019-2020 and broaden the scope to focus on cervical screening to address a drop in screening rates.



Rob Goodyear, Head of Strategic Planning - The Leeds Plan, Leeds CCG, in conversation with Heather Nelson, Chief Executive Officer, Black Health Initiative.

## Early Diagnosis work stream update, Helen Ryan, Macmillan Project Lead



Helen Ryan

**Accelerate, Co-ordinate, Evaluate (ACE)** is a pathway for patients who present with non-specific symptoms where their GP has concern about a serious underlying condition, including cancer. Since the project launch in January 2017, 1,053 patients have now been referred onto the ACE Pathway. From these referrals, 79 cancers have been identified meaning a conversion of 7.5% and 295 significant findings of non-cancer diagnosis (as at January 2019).

Nursing Assessment Clinics are now available across Leeds at St James's University Hospital, Wharfedale Hospital in Otley, Seacroft Hospital in East Leeds and within a community setting at Priory View Medical Practice.

Work is ongoing to further develop links with primary care through Local Care Partnerships and to roll-out the ACE methodology onto other cancer pathways.

In summer 2018 the ACE pathway was nominated for a prestigious Health Sector Journal Award and in November 2018 won a Leeds NHS CCG Star Award for Innovation and Transformation.

The **Tele dermatology** initiative was launched in June 2018 and has since transformed the skin cancer pathway. All patients with a suspected skin cancer are electronically referred from primary care via the two-week wait pathway along with three high quality images of the lesion(s) taken with a dermatoscope by the patients' GP. Images and clinical information are then sent to a consultant dermatologist for review and a diagnosis is made within 48 working hours of receipt.

Benefits include reduction in the patient waiting time of 12 days, reduced patient anxiety and a more rapid diagnosis and treatment plan.



Darren Meade, Project Co-ordinator, Leeds Cancer Awareness, Paul Bollom, Chief Officer, Health Partnerships, Leeds City Council, Ellen Dempsey, Macmillan Project Support, Leeds Cancer Programme.



We are in the process of implementing **Faecal Immunochemical Testing (FIT)**. From 1st April 2019 GP practices across Leeds will be able to offer the new FIT to exclude symptomatic patients at 'low risk but not no risk' of colorectal cancer.

**28 Day Faster Diagnosis Standard** is the continued service improvement and data monitoring work to ensure that the 28 day faster diagnosis standard is delivered across all Leeds Teaching Hospitals NHS Trust cancer pathways by April 2020.

## Living With and Beyond Cancer, Karen Henry, Lead Cancer Nurse, Leeds Teaching Hospitals NHS Trust



Karen Henry

Improvements and achievements across the Living With and Beyond Cancer work stream include all Clinical Nurse Specialists at Leeds Teaching Hospitals NHS Trust now recording **Holistic Needs Assessments (HNA)** of patients within the Patient Pathway

Manager clinical records system,

leading to a month on month increase in the number of HNA's being completed. Our Lead Cancer Nurse has been meeting with all teams on an individual basis looking at tailoring HNA's to different pathways. The aim of the HNA is to ensure that identification of individual patients' needs is undertaken at key points across the pathway and a care plan is developed and shared with the patient outlining what steps have been taken to address any concerns raised.

**End of Treatment Summaries** for renal cancer patients have been implemented and are now in use. Prostate, Breast, Head and Neck and Haematology teams are all working on developing End of Treatment Summaries to be implemented at the end of May. By equipping patients, primary care and secondary care with End of Treatment Summaries, we aim to ensure consistency of care and knowledge, and to ensure patients are equipped with the right information about their care.

Working with former patients and consulting on their experiences, we have revised and developed our **Breast Moving Forward Programme**. Former patients of the programme have come back as volunteers to deliver the programme in its new and exciting format.

The **Enhanced Supportive Care Project** is a programme to look at support for patients who are coming to the end of palliative chemotherapy. Baseline audit work has been undertaken and learning from engagement undertaken by the West Yorkshire and Harrogate Alliance with key stakeholders is in process to ensure this programme is shaped around patient's needs. We aim to start 1:1 clinics

and a patient education programme in April. Alongside this we are also developing a Patient Education Programme for renal and prostate patients to commence in March, with specialist skin and cervical events planned for April.

In December 2018 we concluded a 2 year pilot project delivering **Cancer Care Reviews** in Primary Care in two contrasting areas of Leeds; Aire Valley Medical Group and the Harehills and Belbrooke Practices. In total 213 people were supported to access help for a wide range of both clinical and non-clinical needs and signposting to a wide range of organisations. Feedback was overwhelmingly positive for this type of service and demonstrated improvements in confidence of people to manage their own health and wellbeing following their review. Findings and evaluation from this project are now being used to develop a **Community Cancer Support Service** which will start taking shape from April 2019.

## High Quality Modern Services, Cath Miller, Macmillan Senior Project Nurse



Cath Miller

Cath Miller, Macmillan Senior Project Nurse was appointed at the end of December to lead the High Quality Modern Services work stream working in conjunction with Mike Harvey, Assistant Director of Operations at Leeds Teaching Hospitals NHS Trust and Julie Owens, Leeds Cancer Centre Manager.

A key focus for this work stream is creating the **Healthy Multi-Disciplinary Team (MDT)**. The key outcomes are:

- Decisions about a patient's diagnosis and treatment plan are made more quickly to enable treatment to start sooner through MDT protocolisation;
- More time is given at a MDT meeting to patients who have a complex diagnosis;
- Improved patient access to the latest treatments;
- Effective reporting to allow prospective planning for surges in patient demand;
- Improved information flow between health professionals, through use of digital technology.

The team has been working closely with Mr Bill Cross, Clinical Lead - Prostate MDT to improve the pathway and move towards MDT protocolisation.

The Leeds Teaching Hospitals NHS Trust has recognised the impact in introducing MDT protocolisation and has highlighted it as a priority area. This brings with it support from the Kaizen Promotion Office who will bring knowledge and skills to enable the teams to create a sustainable change.



Professor Sean Duffy, Leeds Cancer Programme Director:

"The Leeds Cancer Programme has made rapid progress in delivering transformational change to make a real difference to cancer care in Leeds. It has successfully brought together partners from local authorities, public health, primary care and the acute settings to ensure there is a coordinated approach to the development of services. Our programme has a clear vision and purpose and has used this very effectively in attracting external funds to support the cancer work of the city. The strong support of the Health and Wellbeing Board has been part of the success of the cancer programme which has also meant that all parts of the health and care system can see how they help deliver the ambitious outcomes for our people."

## 5. Macmillan Engagement Lead, Toni Larter



Toni Larter

Our Engagement work has been seeking to keep in contact with people in Leeds to ask for their feedback and input on the work we are doing and the new developments we are implementing. Through the **Leeds Cancer Programme Engagement Hub** we are

looking to gain insight into whether our projects reflect the needs of Leeds's diverse communities and if our communication tools are understandable, relevant and meaningful.

Through consultation and open conversation and patient feedback we are able to tailor our work to the needs of the people who will use it. From this activity we can then make informed decisions based on discussion and research.

## 6. Communications, Mary Webb, Macmillan Communications Lead



Mary Webb

Following the development of a **Leeds Cancer Programme Communications Strategy** with our partners and stakeholders, we have implemented a programme of awareness raising activities. This is to ensure the dynamic transformation of cancer services in Leeds is

recognised. From establishing a brand identity, to delivering clear, recognisable and accurate communications and developing a new website, we are ensuring the great work and new clinical initiatives are known about at a city-wide, regional and national level. Through the continued transformation of cancer care, and city-wide working, Leeds is truly working towards its ambition to be "The best city for Health and Well-Being".

Checkout our new website:

[www.leedscancerprogramme.org.uk](http://www.leedscancerprogramme.org.uk)

and follow us on twitter: [@LeedsCancerProg](https://twitter.com/LeedsCancerProg)



Dr Sarah Forbes, GP and Associate Medical Director, NHS Leeds:

"In late November we welcomed an array of guests to our Leeds Cancer Programme

celebration event to mark the progress, achievements, lessons learned and plans for the future with a range of stakeholders, health professionals and community members. The event was opened by Cllr Charlwood and was busy, active and provided a lot of good discussion and debate. Two-way communication is integral to the Leeds Cancer Programme and we were pleased so many people took the time to attend."



Cllr Rebecca Charlwood, Executive Member for Health, Wellbeing and Adults, Leeds City Council.

Leeds Cancer Programme

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