

MEETING:	Overview and Scrutiny Committee - Healthy Barnsley Workstream
DATE:	Tuesday, 20 July 2021
TIME:	2.00 pm
VENUE:	The Assembly Room - The Civic

MINUTES

Present

Councillors Ennis OBE (Chair), Bowser, Clarke, Hayward, Kitching, Lodge, Lowe-Fleelo, Newing, Osborne, Smith, Tattersall, Wilson, Wraith MBE and Wray

1 Apologies for Absence - Parent Governor Representatives

Apologies for absence were received from Gemma in accordance with Regulation 7(6) of the Parent Governor Representatives (England) Regulations 2001.

2 Declarations of Pecuniary and Non-Pecuniary Interest

Councillor Ennis declared a non-pecuniary interest in Minute No. 8 as he is a Director of the Barnsley Healthcare Federation Board. Cllr Newing declared a non-pecuniary interest in Minute No. 8 as she is employed by the NHS.

3 Minutes of the Previous Meeting

The minutes of the meeting held on 29th June 2021 were received.

4 Improving Cancer Early Diagnosis

The following witnesses were welcomed to the meeting:

Siobhan Lendzionowski, Lead Commissioning & Transformation Manager, Cancer Programme Lead, Barnsley Clinical Commissioning Group (CCG)

Carrie Abbott, Service Director – Public Health & Regulation, Public Health Directorate, BMBC

Lorraine Burnett, Director of Operations, Barnsley Hospital NHS Foundation Trust (BHNFT)

Dr A Mellor, Primary Care Network Assistant Director and GP

Emma Nebard, Screening & Immunisation Co-ordinator, Public Health England

Kay Mann, Public Health Specialist Practitioner BMBC

Siobhan Lendzionowski introduced this item and invited questions from Members of the Committee.

The NHS Long Term Plan, also known as the NHS 10-Year Plan, was a document published by NHS England on 7 January 2019 and setting out the cancer and early diagnosis priorities for healthcare over the following 10 years. It was highlighted that the NHS Long Term Plan ambition for 75% of cancer patients to be diagnosed at Stage 1 or 2 by 2028 is challenging to achieve and will have been impacted by Covid

as people have been reluctant to visit their GPs. Barnsley is currently at 62%. Effective partnership working and the screening programme will drive an increase in referrals. It is vitally important that people are aware of the symptoms of cancer and contact their GPs in the first instance.

Members were reassured that throughout the pandemic GPs have worked harder than usual, under very challenging circumstances and with multiple pressures on Primary Care. There is a perception that it is difficult to get a GP appointment to start the process of diagnosis, but this is simply not true. GPs will always see cancer patients face to face and have been 'open' throughout the pandemic GPs prefer face to face appointments where this is possible, but this requires people to be sensible and not visit the surgery if they have Covid symptoms, as this has led to problems in terms of staff having to self-isolate. Covid has exacerbated the anxieties of patients who would never normally visit their GP anyway and will have prevented some from coming forward. Some patients prefer phone consultations and there has been a high take-up of consultations over Microsoft Teams, which is becoming the new 'normal'. The preferred method of consultation differs across specialisms.

In terms of non-attendance, the vast majority of patients do turn up for hospital appointments. Those who don't attend are contacted to find out why. Although text messages are used, if no responses are received from patients, they are contacted by letter and their GP informed. This all forms a 'safety net' for those patients on the cancer care pathway to ensure that nobody is left behind. Hospital attendance comparator information will be provided once this has been validated.

For patients with a learning disability who might be experiencing increased anxieties because of Covid, there is a specialist Learning Disability Nurse at the hospital. Information on the disability will also be recorded in case notes, as is the case with other disabilities. The hospital doesn't get it right 100% of the time but continues to strive to do so.

GPs receive specialist 'see the signs' cancer training in Barnsley, which aims to speed up cancer referrals. Performance on cancer screening in Barnsley is very good, coupled with smoking cessation programmes and lifestyle advice which all help to combat the risk of cancer. However, this responsibility does not rest with GPs alone, and Members were asked to encourage uptake of screening programmes within their communities and to stress the importance of attending appointments. It was highlighted that an 'urgent' referral appointment will take place within 14 days. All GP practices have Health and Wellbeing Workers who can offer healthy living advice to patients and encourage them to raise any concerns with GPs.

As the country continues to open up following the recent removal of restrictions there is a need to continue to follow Government guidance and continue to follow basic principles of keeping *Hands* clean, wearing *Face* coverings and keeping one or two metres of *Space* between people. The Hospital is continuing with masks and social distancing for the foreseeable future whilst being as flexible as possible - patients can now be accompanied by someone on appointments. Primary care and health care assistants will continue to wear masks and will encourage patients to do the same. Despite Covid rates and hospitalisations rising in Barnsley, there is still full access to cancer services.

There are always vacancies at the hospital but there are no huge gaps in key posts at the moment. Work with South Yorkshire colleagues takes place to ensure that patients do not suffer because of this. Before Christmas, some patients were sent to Doncaster for operations due to the impact of Covid on planned treatments. The importance of social media cannot be underestimated in getting patients to come forward. For example, the experience of the personality of Sarah Harding and breast cancer led to a huge influx of patients for screening. The hospital is involved in international recruitment, with practitioners trained in Barnsley and then returning to Barnsley once they are qualified, and also works closely with Sheffield University for training. There is an increasing skills mix at the hospital, with care navigators and co-ordinators recruited following conversations with patients about their experiences.

Cancer prevention is a system wide responsibility. There is a whole raft of prevention and screening programmes. Members were reminded that 4 out of 10 cancers are preventable. In terms of lung cancer, 72% of cases are due to smoking, which is highly preventable. A Cancer prevention group is currently being developed and Elected Members were urged to get involved.

A discussion took place around the PSA test for prostate cancer. It was explained that a raised PSA level does not necessarily mean that the patient has prostate cancer, as this level increases as you get older and is just one possible symptom. It may simply be an enlarged prostate, which is treatable by other means. The PSA test is intrusive and is not used for prostate cancer screening for a number of reasons. However, if a younger person presented with raised PSA levels which remain raised after repeating the test, they would be referred on for further investigation. A new blood test for prostate cancer is being developed but has not yet been evaluated. If it is found to be effective for use as a screening tool in the future, it will be adopted. One issue which needs addressing is the embarrassment people feel in coming forward when they have symptoms of many types of cancer which prevents them from seeing their GPs. Members were urged to spread the message in communities to try and reduce this embarrassment and to help engage communities in spreading the message.

RESOLVED that

- (i) witnesses be thanked for their attendance and contribution and for the work they have done, and continue to do under very challenging circumstances, for the people of Barnsley citizens;
- (ii) Hospital attendance comparator information to be provided once this has been validated;
- (iii) Members encourage and support constituents to go for cancer screening and appointments;
- (iv) Thought be given as to the role Area Councils and Ward Alliances have in terms of raising awareness of cancer symptoms and of the various screening programmes – for example, health professionals to attend an Area Chair meeting.

Chair