

## **Improving Cancer Early Diagnosis and Current Cancer Restoration Position**

### **1.0 Introduction**

- 1.1 On 31 March 2020 the Overview & Scrutiny Committee (OSC) were due to look at NHS Cancer and Aortic Abdominal Aneurysm Screening Programmes in Barnsley, but as this fell at the beginning of the Covid pandemic, the meeting had to be cancelled and the report was released for information only.
- 1.2 Following the impact of the pandemic and concerns around the potentially serious effects upon cancer diagnosis and treatment, the committee are being presented with an update on early cancer diagnosis, including screening services, and a summary of how partners plan to restore services to pre-pandemic levels.

### **2.0 Background**

- 2.1 The NHS Long Term Plan, also known as the NHS 10-Year Plan, was a document published by NHS England on 7 January 2019. It sets out the cancer and early diagnosis priorities for healthcare over the following 10 years.
- 2.2 Once a year, operational planning guidance is produced that sets out the NHS cancer priorities for the year ahead. This year (2021/22) those priorities are to:-
  - support the challenge to restore services
  - meet new care demands
  - reduce the care backlogs that are due to the COVID impact
  - recognise staff recovery from additional pressures presented over the last 12 months due to COVID
  - take further steps to address inequalities in access, experience and outcomes
- 2.3 In order to meet those priorities, Barnsley Clinical Commissioning Group (CCG) and partners are expected to deliver the following actions between April 2021 and September 2021:-
  - encourage more patients to come forward - work with GPs and the local population to increase the number of people coming forward and being referred with suspected cancer, with a particular focus on groups under-represented and who have not come forward compared to pre-pandemic levels
  - GP practices to complete the Quality Improvement module of the NHS Quality Outcomes Framework on early cancer diagnosis to demonstrate measurable improvement
  - work with public health commissioning teams to increase take up of new ways of working, and new technologies, to support effective clinical prioritisation for diagnostics
  - accelerate the development of rapid diagnostic pathways for those cancer pathways which have been most challenged during the pandemic
  - from October 2021, demonstrate a return to meeting standards for the percentage of people who know whether they have cancer or not within 28 days of a GP referral (target initially set at 75%)
  - ensure that capacity is in place to meet the restoration demand in diagnostic testing at the start of the cancer pathway
  - restore and maintain screening programmes
  - Minimising harm to people who are waiting for tests/treatment or choosing to delay their cancer referral or treatment due to COVID fears

### **3.0 Current Position**

- 3.1 The Improving Cancer Early Diagnosis & Current Cancer Restoration Position report (Item 4b-attached) has been produced by the CCG and partners to inform elected members of the current position in relation to cancer prevention and early diagnosis and how they plan for services to recover after the impact of the Covid pandemic. The report specifically covers:-

- the roles and responsibilities of each partner
- prevention work and the impact of lifestyle choices
- the impact of Covid on screening services and services for people living with or beyond cancer
- Covid recovery plans, including narrowing the gap between the number of current referrals and pre-Covid levels
- future plans and challenges faced by partners

#### **4.0 Invited Witnesses**

4.1 At today's meeting, a number of partners have been invited to answer questions from the Overview and Scrutiny Committee regarding their work:-

- Jamie Wike, Chief Operating Officer, Barnsley Clinical Commissioning Group (CCG)
- 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
- Sally Eapen-Simon, Screening & Immunisation Public Health Consultant, Public Health England

#### **5.0 Possible Areas for Investigation**

5.1 Members may wish to ask questions around the following areas:-

- What has gone well over the last 12 months, how do you know, and have permanent changes to provision and service delivery been made as a result?
- What do you consider to be the greatest barrier to achieving the priorities for this year and how do you plan to overcome them?
- Where do you consider yourself to be in your journey to achieving the actions identified as necessary to address the NHS cancer priorities?
- How do you plan to manage employee wellbeing after Covid whilst, at the same time, clearing existing backlogs and meeting new care demands?
- Are there, or have there been, any key vacancies that you are struggling to recruit to, and do services have the capacity and resources to meet demand?
- What analysis has been done to determine which GP surgeries are performing poorly in terms of screening, what is the information telling you and what targeted interventions have been put in place?
- What further support do GPs need to ensure cancer referrals are made earlier?
- How will you influence behaviour change to encourage more people to adopt healthier lifestyles and access support services, eg stop smoking?
- Will the government's lifting of restrictions change the way you operate and if so, how will you ensure cancer patients remain and feel safe?
- What can be done to speed up recovery from Covid in those areas that are not recovering as quickly as others?
- How likely is it that the pilot projects and the trials of new technology will be adopted and fully embedded into service delivery and how will they improve the outcomes for people who are at risk of, or have, cancer?

- Where do the greatest inequalities lie both geographically and demographically and how do you plan to target the hard to reach groups?
- When was the 'C The Signs' referral system introduced, what has take-up been like, and what impact has it had?
- What can elected members do to support partners in encouraging people to come forward and ensure that they attend appointments?

## 6.0 Background Papers and Useful Links

- Item 4b (attached) – Improving Cancer Early Diagnosis & Current Cancer Restoration Position
- Report to OSC on 31 March 2021 – NHS Cancer Screening & Aortic Abdominal Aneurysm Screening Programmes in Barnsley  
<https://barnsleymbc.moderngov.co.uk/ieListDocuments.aspx?CId=224&MId=5899&Ver=4>
- NHS Long Term Plan  
<https://www.longtermplan.nhs.uk/>
- South Yorkshire & Bassetlaw Integrated Care System Cancer Alliance  
<https://canceralliancesyb.co.uk/>
- NHS Operational Planning & Contracting Guidance 2021/22  
<https://www.england.nhs.uk/wp-content/uploads/2021/03/B0468-nhs-operational-planning-and-contracting-guidance.pdf>
- NHS Quality Outcomes Framework – Quality Improvement Domain: Early Diagnosis of Cancer 2020/21  
<https://www.england.nhs.uk/wp-content/uploads/2020/02/20-21-gof-qi-cancer.pdf>
- C The Signs  
<https://cthesigns.co.uk/>
- The Well Centre, Barnsley  
<http://www.barnsleyhospitalcharity.co.uk/the-well/>

## 7.0 Glossary

BCSP	Bowel Cancer Screening Programme
BSP	Breast Screening Programme
CCG	Clinical Commissioning Group
DHSC	Department of Health & Social Care
FIT	Faecal Immunochemical Testing
GI	Gastro-Intestinal
HPV	Human Papillomavirus
ICS	Integrated Care System
KPIs	Key Performance Indicators
NHSE/I	NHS England/Improvement
NSC	National Screening Committee
OSC	Overview & Scrutiny Committee
PHE	Public Health England
QA	Quality Assurance
SQAS	Screening Quality Assurance Service
STHT	Sheffield Teaching Hospitals NHS Foundation Trust
SYB	South Yorkshire & Bassetlaw

## 8.0 Officer Contact

Jane Murphy, Scrutiny Officer, [Scrutiny@barnsley.gov.uk](mailto:Scrutiny@barnsley.gov.uk)  
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