The East Midlands Cancer Alliance (EMCA) Briefing Note - 16 May 2022

For the attention of EMCA Board members, Accountable Officers, CEOs, Cancer Managers and Cancer leads in CCGs, ICSs, and trusts:

The East Midlands Cancer Alliance (EMCA) Board met on 16 May 2022 via MS Teams to review the work and progress of the partner organisations in the EMCA. The meeting was chaired by Richard Mitchell CEO University Hospitals of Leicester NHS Trust. The Board has representation from the five East Midlands ICSs from both commissioning and provider organisations. It also has representatives from specialised commissioning, primary care, public health, Health Education England, Macmillan, and Cancer Research UK (CRUK). The Chair opened the meeting and welcomed contributions from all colleagues.

Covid-19 Response, Performance and Recovery Update

The Midlands performance position was presented, highlighting patients in the 62-day backlog and patients waiting longer than 104 days. Largest waiting lists are within the colorectal and urology pathway; however, all tumour sites have seen a rise. MRI and endoscopy recovery plans need to be strengthened to drive recovery. Suspected cancer referrals remain higher than pre-covid levels therefore alliance members must plan to deliver increased levels of activity for the year coming. Overall, the positions remain challenged, although the faster diagnosis standard improvement demonstrates the excellent work the clinical and operational teams are doing, alongside ICS leads. Agreement to dedicate additional time at the next board meeting on regional, alliance and provider performance.

Screening Update

The focus across all programmes remains upon recovery. Bowel screening has now recovered with the implementation of Age Extension for 56-year olds has now been undertaken. Breast screening services continue to be in a more challenged position with actions identified to remedy workforce gaps. Cervical Screening has been in fairly stable position (14-day turnaround time reporting). Health inequalities information has been included within screening update reports and will continue to be an area of focus.

Gynaecology One Stop Clinic Update

The team from Kettering General Hospital, presented their gynaecology one stop service model to the Board. Four main clinics: - Postmenopausal bleed (suspected uterine), colposcopy (suspected cervical), pelvic mass (suspected ovarian), rapid 2WW (suspected vulva, vaginal, non-specific symptoms). Challenges faced included capacity issues (patients seen in incorrect clinic), nursing staff levels, PACS delay and limited clinic space. Investment in service saw new clinics set up, additional nurses employed, PACS embedded, clinic capacity adjusted to fit demand and new colposcopy clinics.

Northampton General Hospital also presented their one stop service which has performed as the number one gynaecology service for the faster diagnosis standard in the most recently released data. The success of the model is due to the multidisciplinary approach taken. Seven-day appointments have been implemented and all investigations are available at the first appointment and all biopsies are chased daily by admin staff with access to a shared database. A weekly benign gynae MDT has been set up to safety net any patients that don't neatly fit into a defined pathway. For postmenopausal bleeding there are three one stop nurse led clinics each week.

Psychotherapy Video Project Update

The Nottinghamshire model for integrated video psychotherapy for people living with a cancer diagnosis was presented. Using the stepped care model, the four levels built up from level 1, openly available self-management resources for all staff and patients to level 4 specialist psychological therapies for people with complex needs. Collaborative work with local clinical psychology services with highly engaged local leaders has been key to success. Due to the innovative nature of the project it has led to increased recruitment and retention, additionally the digital/remote nature of the project has allowed recruitment from out of the region.

Future Status - Planning Update 2022/2023

The EMCA Summary Plan for 2022/23 was presented to the Board. The funding framework is split into three streams i.e. faster diagnosis and operational improvement; early diagnosis; treatments and personalised care. Delivery principles for the NHS Cancer Programme are reducing health inequalities; improving patient, carer experience; workforce, and data-driven transformation. Five priority tumour sites that will benefit from investment for clinical leads (urology, lower GI, gynae, lung and skin) with specific interventions for each that are not only focussed upon recovery but balancing approaches between primary and secondary care. The development of operational delivery networks for lung and head and neck was also highlighted. Rapid diagnosis service work will be focussed on individual tumour sites and deep dives will take place to understand issues and overcome obstacles. Supplementing this work will be the new stream MDT Optimisation that will be available for all tumour sites. The community diagnostic centre programme also offers a unique opportunity to address diagnostic issues with capital available for the right projects.

Systems were asked to identify their clinical cancer leads and an operational lead to attend the clinical cancer leads meeting. System cancer board was also requested to ensure finance and overarching strategy sit within these.

Items for Information and Endorsement

For Information

- Midlands Screening Inequalities Dashboard – launched at the Big Conversation on 12 May
- Finance - Update 2022/2023
- NHS Long Term Plan highlight report pack 21/22
- EMCA Q4 Report Draft
- PHE/NDRS Staging Data Report/position

The following items were endorsed by members of the Board post meeting:

- Lymphoma PSFU Guidelines

For further information please contact:
Mike Ryan, Head of Cancer Alliance, michael.ryan@nhs.net; telephone 07783 815336

Date of next Board Meeting:
18 July 2022 @ 1pm via MS Teams

Please find below a table showing you who your EMCA ICS leads are:

Midlands ICSs	EMCA board representative ICS Leads
Leicestershire	Helen Mather helen.mather@leicestercityccg.nhs.uk
Nottinghamshire	Simon Castle simon.castle1@nhs.net
Derbyshire	Monica McAlindon Monica.mcalindon1@nhs.net
Lincolnshire	Louise Jeanes louise.jeanes@nhs.net
Northamptonshire	Linda Dunkley linda.dunkley@nhs.net