



Greater Manchester Cancer

GM Cancer Board Update

February 2022

10 Year Plan on Cancer

Cancer Alliance Role

- The Greater Manchester Cancer Alliance has been asked to help coordinate a GM 'whole-system' response to the governments 'call for evidence' on cancer, announced on the 4th February 2022.
- The information the Secretary of State for Health & Social Care, Sajid Javid, gathers from this will help inform a new 10 year cancer plan which we expect to be published later this year.
- By 1st April we are asked to submit our response via the gov.uk website on what interventions we think need to be supported within a new 10 year cancer plan.
- In addition, we aim to produce a more detailed paper setting out what we feel are the most important new interventions to secure an improved cancer survival, an improved patient experience alongside a reduction in unwarranted variation for our GM population. This paper will add commentary on strengths within Greater Manchester that can support this national effort, and where funding and targeted support may be useful.

10 Year Plan on Cancer continued

- In light of this, we are offering an opportunity for key stakeholder to comment on the domains outlined below and encouraging, where appropriate, distribution throughout the networks and organisations

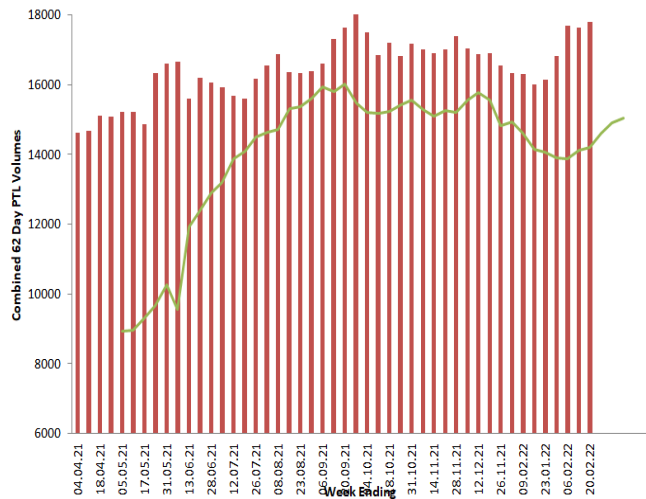
Domains

1. How to raise awareness of the causes of cancer and how it can be prevented?
2. How to raise awareness of the signs and symptoms of cancer?
3. How to get more people diagnosed quicker?
4. How to improve access to and experiences of cancer treatment?
5. How to improve after-care and support services for cancer patients and their families?
6. Do you have any suggestions for how can we maximise the impact of research and data regarding cancer and cancer services in England, including how we can translate research and data into practice sooner?

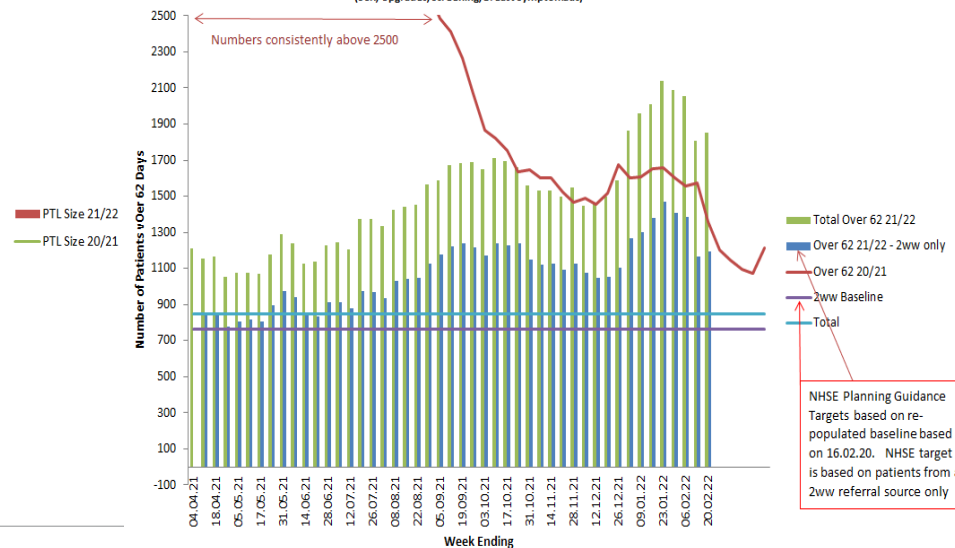
Cancer Performance

- The total combined 62-day PTL is 17794, up 157 in week.
- The number of patients on combined 62 day PTLs, who are already over 62 days this week is 1858, up 44 in week. 1196 of the 1858 are from a 2ww referral source (baseline 761), an increase of 29 in week.
- The number of patients on the PTL over 104 days (on their 62 day pathway) has increased by 16 in week to 521. 291 (56%) are on Upper / Lower GI pathways. 252 of the 521 patients are from a 2ww referral source (up 9 in week) against the baseline of 136. A patient level review is being undertaken by the Cancer Alliance

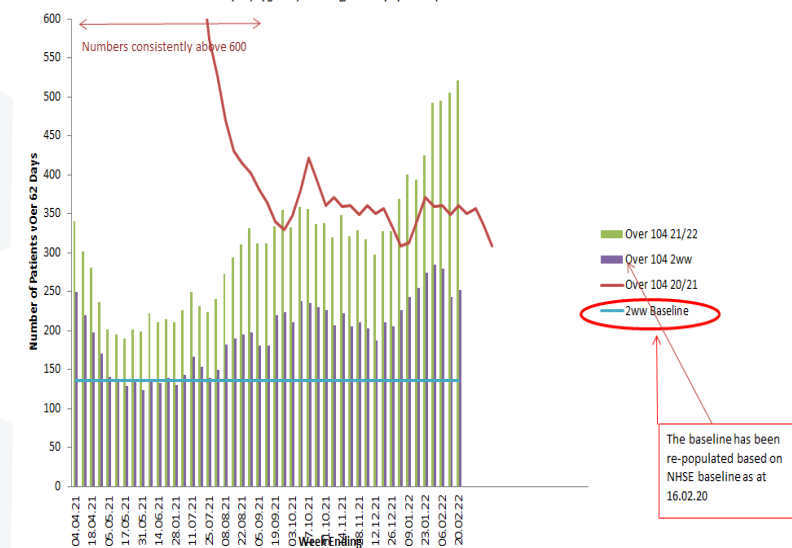
Current 62 Day PTLs Size
(SCR, Upgrades, Screening, Breast Symptomatic)



Total Number of Patients on 62 day Pathways, Already Beyond 62 Days
(SCR, Upgrades, Screening, Breast Symptomatic)



Total Number of Patients on 62 day Pathways, Already Beyond 104 Days
(SCR, Upgrades, Screening, Breast Symptomatic)



Cancer Performance continued

CWT performance

Cancer Performance at All Providers in GM
December 2021

| Metric Name | Total | Within | Breaches | Performance |
|---|----------|---------|----------|-------------|
| Seen within 2 weeks of referral | 11,629.0 | 9,098.0 | 2,531.0 | 78.24% |
| Seen within 2 weeks of referral - Breast Symptomatic | 838.0 | 320.0 | 518.0 | 38.19% |
| 28 Days FDS | 11,895.0 | 7,528.0 | 4,367.0 | 63.29% |
| Treated < 31 Days Subsequent Treatment - Anti-cancer drug | 244.0 | 242.0 | 2.0 | 99.18% |
| Treated < 31 Days Subsequent Treatment - Radiotherapy | 454.0 | 453.0 | 1.0 | 99.78% |
| Treated < 31 Days Subsequent Treatment - Surgery | 212.0 | 186.0 | 26.0 | 87.74% |
| Treated < 31 Days to First Treatment | 1,382.0 | 1,295.0 | 87.0 | 93.70% |
| Treated within 62 Days from consultant upgrade to first treatment | 341.5 | 253.5 | 88.0 | 74.23% |
| Treated within 62 Days from national screening to first treatment | 71.5 | 56.0 | 15.5 | 78.32% |
| Treated within 62 Days from referral to first treatment | 754.0 | 471.5 | 282.5 | 62.53% |

A deteriorated position in the December CWT performance. However, in December, there was significant reduction in the long waiting patients (numbers increased again through Omicron).

Significant front end pathway challenges in skin and breast.

First treatment remains 92.5% of pre-covid levels.

GM Cancer Podcasts

In 2021, Greater Manchester Cancer launched its own podcast, covering a range of topics relevant to our cancer system in GM and interviewing a range of clinicians, patients, researchers and managers and hosted by BBC broadcaster Steve Bland.

You can find all 6 episodes so far via Apple Podcasts, Spotify or wherever you get your podcasts.



[Our podcast page on iTunes](#)

[Our podcast page on Spotify](#)

Latest episodes: World Cancer Day (February 2022)

We launched two special episodes to mark World Cancer Day 2022:

Episode 1: World Cancer Day pt 1: The next 12 months in cancer research

Host Steve Bland looks ahead to the next 12 months in cancer research with Professor Rob Bristow, Director of the Manchester Cancer Research Centre and discusses spatial technologies, inclusion in clinical trials, and repurposing drugs.

Episode 2: World Cancer Day pt 2: Closing the care gap in Greater Manchester

Steve explores the ground-breaking projects designed to transform patient pathways, in the company of Lisa Galligan-Dawson, Performance Director at GM Cancer. Steve also speaks to Kirsty Rowlinson-Groves from Prehab4Cancer to find out what drives her to make a difference.

Single Queue Diagnostics

- A paper to advise the GM Cancer Board of the output relating to the 'Single Queue Diagnostics' pilot undertaken May - October 2021, focussed on two areas of specialist diagnostics (EBUS and EUS) will be presented in March 2022
- Final sign off of the evaluation was on the 1st March 2022 from team who led the work and it will be shared throughout GM via the COOs, gold command, CCC and PFB.
- The finding showed significant improvements in days saved in both SQD EBUS services and SQD EUS services
- The SQD EBUS service reduced waiting times for EBUS across the participating sites by 20% and reduced the variation in waiting time by 40%, similar results were seen in SQD EUS
- The top priority for patients surveyed in this pilot was to have the fastest possible EBUS / EUS regardless of travelling
- Over 95% of EBUS & 90% of EUS patients surveyed in this pilot were 'Very Happy' or 'Happy' with the care they received
- Over half of patients completing the experience of care surveys are from the most deprived areas of GM
- Full report will be shared with Cancer Board in March 2022.

NHS-Galleri trial update

The screening unit has now completed its run at Oldham, Salford, Manchester and Trafford, currently live in Heywood, Middleton and Rochdale. Wigan, Bury, Bolton, Stockport and Tameside & Glossop will follow.

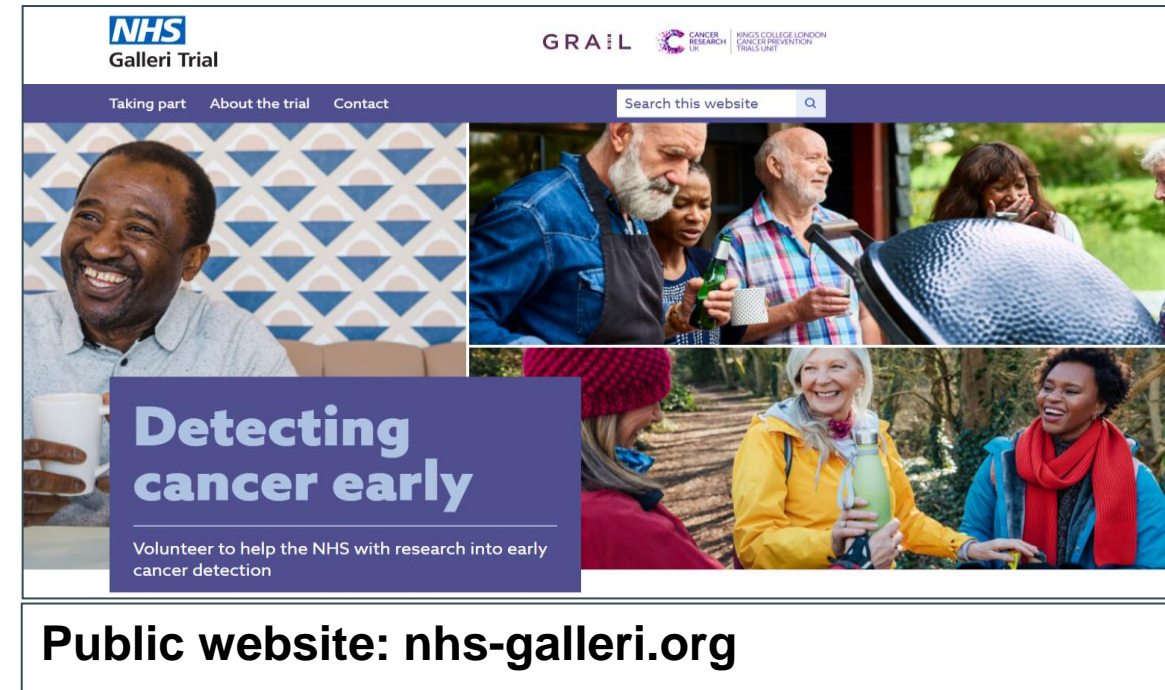
Referrals are being managed at present by the Rapid Diagnostic Centre teams for NCA & MFT (dependant on locality) in the first instance.

To date, there have been over 6500 individuals having participated in the trial in GM

A number of participants with Cancer-Signal Origins identified from their bloods have been referred on a 2ww pathway for investigation.

Unfortunately, in January 22, an issue in the GRAIL processing lab led to a backlog of NHS-Galleri samples waiting to be analysed and, due to this, there was a pause of invitations. The trial restarted in early February with reduced capacity, achieving full capacity from 28/02/22.

A copy of the presentation from the Nov 21 briefing session is available to view here: <https://bit.ly/GalleriGMNov21>



Public website: nhs-galleri.org



The GM cancer team have also produced a podcast episode about the trial, featuring GRAIL UK's Director of Intelligence, Sara Hiom and local representatives discussing Galleri in further detail.

Spotify: <https://bit.ly/30OImK4>

Apple Podcasts: <https://bit.ly/3r4FT8d>

Annual Report 2020 - 2021



Greater Manchester Cancer's Annual Report will this year cover a **two year period**.

This accounts for impact on teams in the initial wave of COVID-19.

The report covers all parts of the cancer pathway as per previous years. It is also due to give an update on the 'Taking Charge' document, which detailed our 5 year cancer plan from 2017 – 2021.

The report is almost complete and we hope to have a version to share with you in advance of March's Cancer Board.

Note: Images shown are in draft and represent an example of the full report style.