

Primary Care Network Bulletin: May 2022

Included in this Bulletin:

- Non-Site Specific Webinar Resources
- Gynaecology Webinar Resources
- Breast Webinar Resources
- Future GatewayC Webinar Topics
- Bowel Cancer Animation
- Translated FIT Patient Information Leaflets
- Translated Cervical Screening Patient Letters
- Skin Cancer Awareness Month – May 2022
- PCN Funding 22/23
- Coming soon...



We now have a named cancer lead in each of the 67 Primary Care Networks across Greater Manchester - On behalf of the Cancer Alliance we would like to thank you for your continued engagement and support to improve the early diagnosis position for our population.



GatewayC Live Greater Manchester Webinars & Infographics:

Please use the link below to access **all** GatewayC Live GM webinar materials produced to date - this now includes the non-site specific & gynaecology infographic; full webinar recording and Fast Facts Video:

<https://www.gatewayc.org.uk/free-webinars-gm/>

Also attached for ease are the PDF copies of the **non-site specific and gynaecology infographics**. Hard copies of all infographics produced to date will be sent out to each practice following the GM Study Day. All infographics will be also be uploaded onto GM GP systems to support GP decision making.

As you are aware, we have commissioned a further roll-out of GatewayC Live GM Webinars for 22/23 and have attached the list of proposed topics for this year for your information.

Reminder: Breast Referrals



Please could we ask that you **re-share** the materials produced following the breast cancer webinar with practices in your PCN.

The 30 minute webinar (accessed via the link above) explores the key risk factors for breast cancer, concerning symptoms, advice for primary care, breast cancer in men and transgender patients, what happens in clinic, breast pain; and the referral pathway in Greater Manchester.

BREAST CANCER THINK A-G
Supporting earlier & faster cancer diagnosis

FAST FACTS

- ASSESSMENT** (A): People with red flag symptoms of breast cancer, such as a breast or axillary lump, new unilateral nipple retraction or suspicious skin changes, need referral for triple assessment.
- BREAST PAIN** (B): Breast pain, without red flag symptoms, is not a symptom of breast cancer.
- CONSIDER BREAST CANCER IN MEN AND TRANSGENDER PATIENTS** (C): Breast cancer can occur in transgender men and transgender women. It is important to refer if symptoms are consistent with breast cancer.
- DISCHARGE** (D): Nipple discharge can be pathological or physiological. Refer people, using a suspected cancer pathway, who have a unilateral, unilateral nipple discharge that is bloody or clear and that occurs spontaneously (without pressure).
- EXAMINATION** (E): A breast examination is required before referral: the axilla to breast and axillary lumps, pathological nipple discharge, new unilateral nipple retraction; unexplained skin changes such as tethering, induration or erythema.
- FAMILY HISTORY** (F): A first- and second-degree family history should be taken in all patients with breast symptoms to assess risk. If a patient meets the NICE referral criteria, please refer to the family history clinic at your local breast unit.
- GREATER MANCHESTER REFERRAL PROFORMA** (G): Please refer all patients using the Greater Manchester form. Ensure the patient understands the reason for referral. Include triple information as this helps direct patients to the most appropriate investigation or assessment.

Online cancer education for healthcare professionals Register here: www.gatewayc.org.uk/register

GMCA Greater Manchester Combined Authority NHS Greater Manchester

Bowel Cancer Animation: Know the Signs

Bowel cancer is the fourth most common form of cancer in the UK. This animation has been developed to educate and inform patients of the signs and symptoms of bowel cancer.

Please encourage practices in your PCN to share this link with their patients as appropriate and via practice websites.

[Know the signs: Bowel Cancer - YouTube](#)

Translated FIT Patient Information Leaflets:

As promised at the FIT PCN session in March – please find attached translated patient information leaflets.

Please encourage practices in your PCN to share as appropriate with their patients and via practice websites.

All FIT resources available can now be found on the GM Cancer Early Diagnosis webpage:

<https://gmcancer.org.uk/early-diagnosis-primary-care/primary-care-education-resources/>

Translated Cervical Screening Patient Letters:

Please find attached translated patient letters to encourage attendance for cervical screening.

Continuation of the £3,000 PCN Cancer Lead Funding for 22/23:

Greater Manchester Cancer Alliance have secured funding for the continuation of the funded programme of support to PCNs.

The Cancer Alliance will allocate £3,000 to each PCN to support in the delivery of the PCN DES and primary care improvements. The Cancer Alliance will provide further support in the form of communication materials, education sessions and resources and in addition to the CCG cancer commissioning managers will be a point of contact for PCNs for any queries or issues relating to early diagnosis cancer pathways.

Coming soon....

- ✓ Translated 2ww referral letters for patients
- ✓ BI Data Session
- ✓ Tuesday 24th May: PCN Cancer Lead Session
- ✓ SystemOne Search for: lung cancer diagnosis without a fast track referral
- ✓ SystemOne prompt to remind / ensure a FIT test is completed for all lower GI suspected cancer referrals
- ✓ Mastalgia pathway
- ✓ Breast Cancer Animation



Sun Awareness – Skin Cancer Awareness Month:



May is skin cancer awareness month, links to relevant resources will be shared with you when available.

Please also keep an eye on our social media platforms and relevant tweets related to skin cancer awareness throughout the month of May.



Please also **re-share** the skin webinar materials to practices in your PCN to support the management of referrals.

<https://www.gatewayc.org.uk/free-webinars-gm/>

SKIN CANCER THINK A-G
Supporting earlier & faster cancer diagnosis

FAST FACTS

- A ASK ABOUT FAMILY HISTORY, SUN EXPOSURE & IMMUNOSUPPRESSION**
Family history of skin cancer and skin that burns easily in the sun increases risk of skin cancers. Other associated risks include prolonged or repetitive high-intensity sun exposure, and immunosuppression.
- B BE AWARE OF UNUSUAL PRESENTATIONS**
Including nail pigmentation and non-specific pre-papular lesions.
- C COLOUR, SHAPE & SIZE**
 - Lesions with multiple colours, or that have an irregular or change in shape or size should be investigated
 - Refer patients using a suspected cancer pathway referral for melanoma if they have a suspicious pigmented skin lesion with a weighted 7-point checklist score of 3 or more
 - Refer lesions suspicious of possible squamous cell carcinoma via the same cancer referral pathway
 - Refer only high-risk basal cell carcinomas on the cancer referral pathway
- D DERMOSCOPY**
Dermoscopy can help identify non-melanocytic conditions such as actinic keratosis. Refer patients using a suspected cancer pathway referral (for an appointment within 2 weeks) if dermoscopy suggests melanoma of the skin.
- E ENCOURAGE SELF-MONITORING & SAFE SUN EXPOSURE**
The British Association of Dermatologists advise patients to follow the ABCDE rule, and to encourage self-monitoring of pigmented lesions, and that health professionals provide sun safety resources.
- F FULL SKIN CHECK**
Skin examinations can identify incidental and/or suspicious growths or moles. Be alert to patients reporting itching, bleeding, or soreness.
- G GREATER MANCHESTER REFERRAL PROFORMA**
 - Please refer all patients using the Greater Manchester form
 - Ensure the patient understands the reason for referral
 - Include fully information as this helps direct patients to the most appropriate investigation or assessment

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GMCA Greater Manchester Cancer Alliance
EUS European Union
NHS.uk

Any feedback or queries please direct to:

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