

Gynaecology

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GP Education

- Suspected cervical cancer referral training and education package development for GP's in conjunction with ED Programme. To be rolled out November 2022.
- Gateway C live webinar took place March 2022
- Webinar & In –person GP training session completed.
- Cervical assessment training planned and Atlases purchased for all primary care practices.

HPV Vaccination

HPV Vaccination has caught up with all backlog and are now up to date.

Best Timed Pathways

Best timed pathways support the ongoing improvement effort to shorten diagnosis pathways, reduce variation, improve experience of care, and meet the Faster Diagnosis Standard (FDS). Below are the best timed pathways for ovarian, endometrial and cervical, vulval & vaginal cancer. GM BTP are more ambitious in terms of SMDT review point compared to NHS Gynae BTP. Local unit audits commenced to identify any bottle necks to support the achievement of BTP across GM.

The Faster Diagnostic Standard

The faster diagnosis standard (FDS) aims to ensure patients will have cancer ruled out or diagnosed withing 28 days of referral.

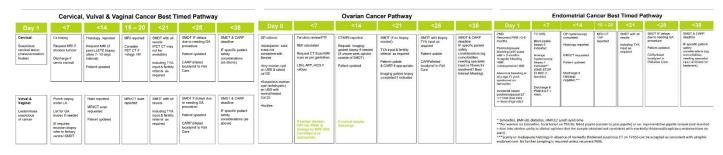
Rapid Diagnostic Centres (RDC) are now part of the NHS Cancer Programme's strategic approach to FDS. This framework seeks to align this work with other programmes such as CDC.

The Benefits

- An earlier and faster diagnosis to patients whether or not they are ultimately diagnosed with cancer
- Excellent patient experience, a holistic assessment of patient needs, and streamlined support across community, primary and secondary care.
- Increased capacity in the system, through more efficient diagnostic pathways.

Support systems to reach the FDS

The 7 RDC principles remain the core underpinning of the framework and renamed as the Faster Diagnosis Principles, with the Best Practice Timed Pathways documents providing the clinical detail for how tests can be coordinated, and timely diagnosis achieved for patients with defined symptom criteria NSS pathways will be included in CWT data from October 2022.



GM Gynaecology Suspected Cancer Referrals. Pre-Covid (2019) and Recovery Period (2022)

The Graph shows the increase of two week wait referrals in GM, compared to prepandemic levels. The focus remains on cancer, and all localities are achieving the 14 day standard (Average wait time 12 days). Gynaecology across GM is recovering the COVID 18 week backlog for benign gynaecology which has also impacted clinical capacity.

