

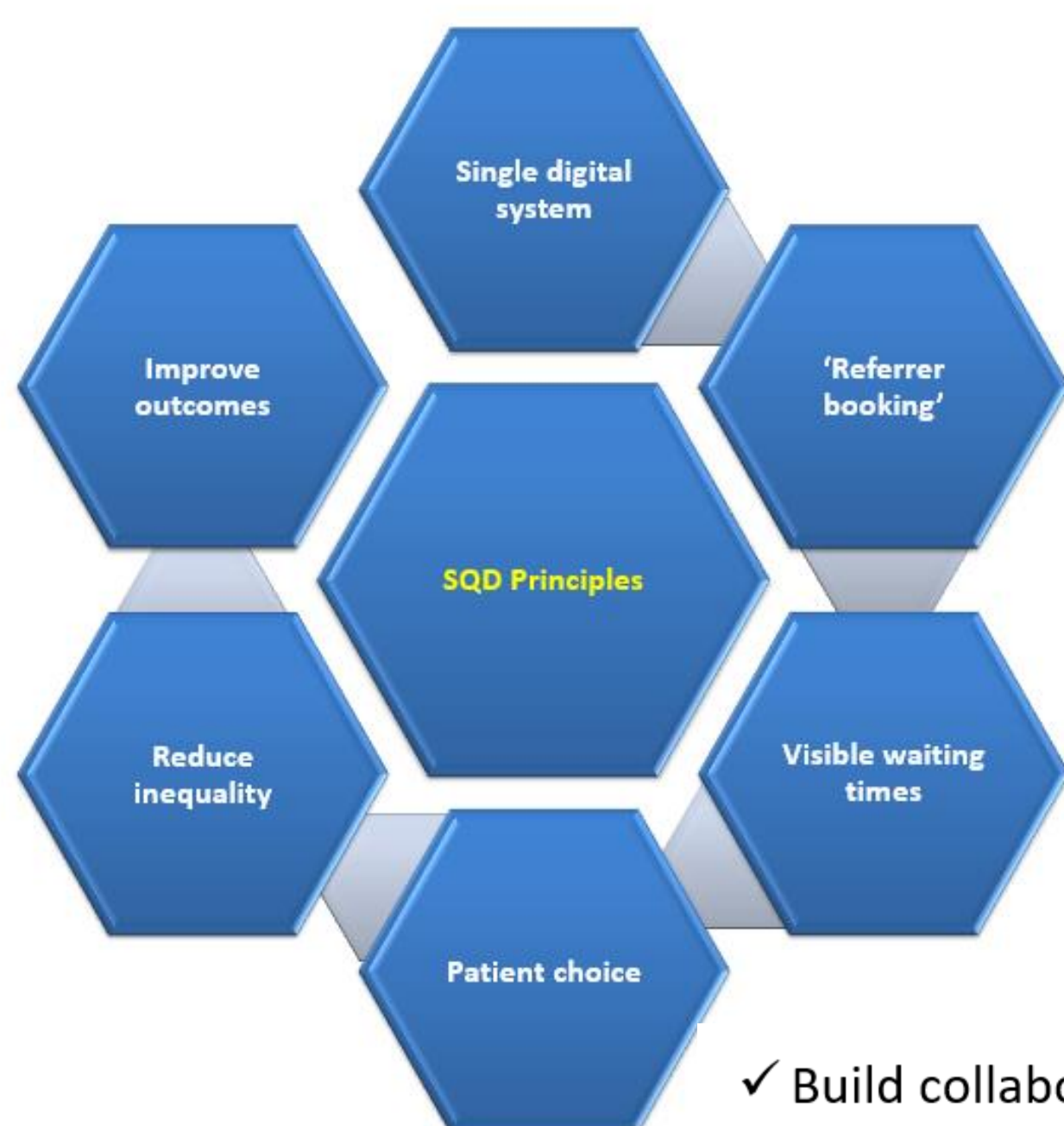
## GM Single Queue Diagnostic Programme

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The Christie NHS Foundation Trust and GM Cancer Alliance, GM Cancer Alliance.

### Project Aim

To create a single digital booking system utilising the capacity across Greater Manchester.



#### Guiding principles

- ✓ Build collaborative networks & system working
- ✓ Empower clinical teams with the ability to co-ordinate cancer pathways
- ✓ Breakdown organisational barriers and fixed referral routes
- ✓ Maximise diagnostic capacity & reduce waiting times
- ✓ Improve experience of care

### Results so far:

#### Live Services – entire GM system:

##### Lung cancer pathway

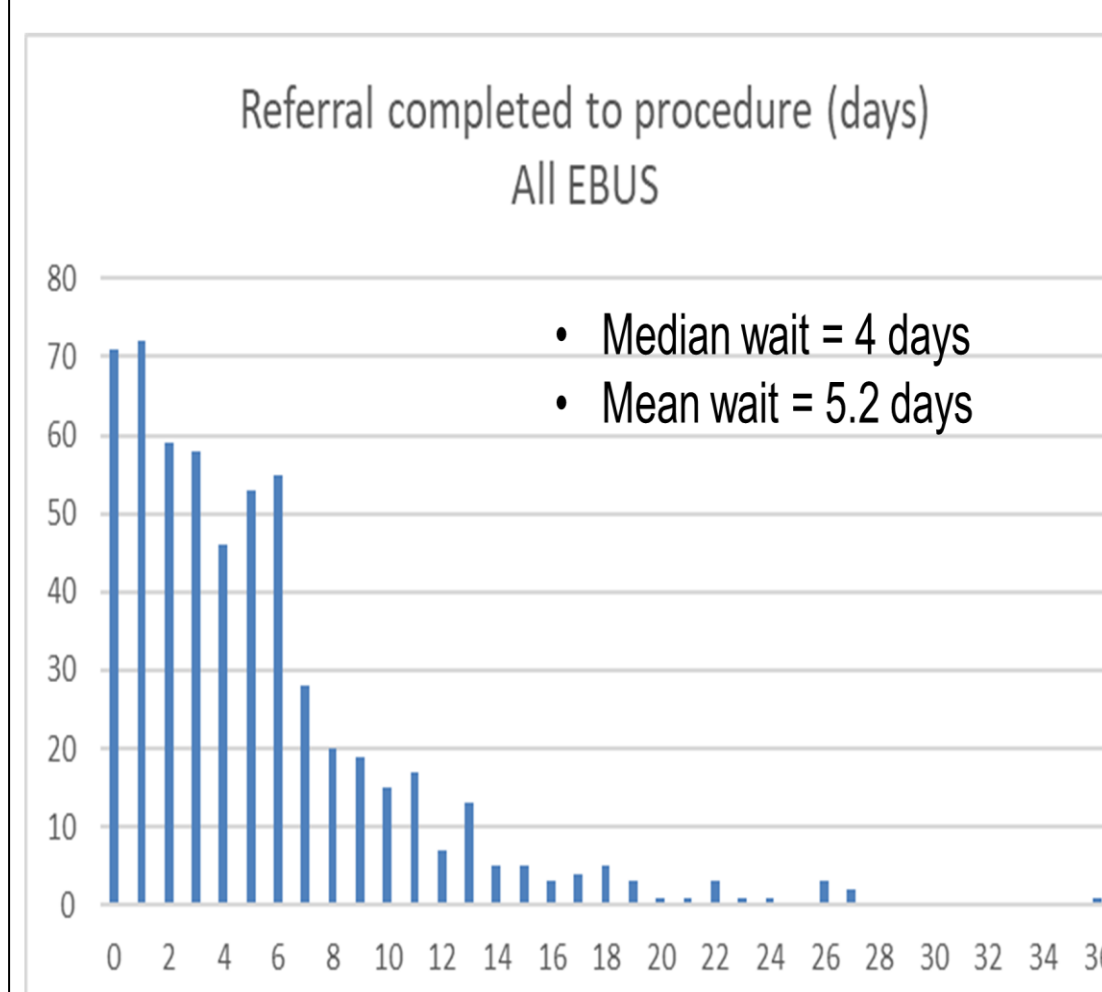
- EBUS, LAT, PB, and CTGLB

##### Oesophageal cancer pathway

- EUS – OG/HPB (excluding MFT)

### Key successes

Median TAT from 'referral completed' to procedure (all EBUS).



- Referral completed' = referral form generated and patient clinically eligible for test (e.g. medications ceased).
- **77% seen within 7 calendar days of referral completed** (National EBUS service specification, target = >85%)
- In 2018 this was 64% across GM.
- 4% seen 15 days or more after referral completed (typically patient choice).

Scan the QR code with your phone's camera below for more information on SQD.



### Next steps

- PET-CT design and process analysis.
- Scoping Complex Polypectomy / EMR / TAMIS (LGI), LATP (Prostate), further Interventional Radiology
- Procurement for 12 months from April 24 completed (funded via Cancer Alliance) to complete wider roll out and full evaluation

### Approach

- Standardised requesting standards for Endobronchial Ultrasound (EBUS), Local Anaesthetic Thoracoscopy (LAT), Peripheral Bronchoscopy (PB)/Mini Probe and minimum datasets across GM, reducing clinical administrative burden.
- Alignment of procedure instructions and patient information.
- Patient web page and information leaflets to support patient movement around the system standardised and developed.
- Patient and user satisfaction surveys established.
- GM system Capacity and Demand modelling for EBUS (including Target Lung Health Check impact).
- Standardised delivery of LAT procedures and assessment.
- Standardised CT guided Lung Biopsy (CTGLB) vetting and a focus of upskilling existing workforce.
- Standardised requesting and criteria for CTGLB.
- Ambulatory CTGLB provision rolled out across all GM Trusts.
- Additional administrative support provided – until system integration.
- GM Pathology Standard Operating Procedures (Lung and Oesophageal (OG) currently) created and implemented.
- Commenced work to agree reporting standardisation.