



Greater Manchester Cancer Alliance

Haemato-Oncology

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Haemato-Oncology Pathway Board Audit of Patients with Lymphoma Referred on a Suspected Cancer Pathway: Room for Improvement.

Background:

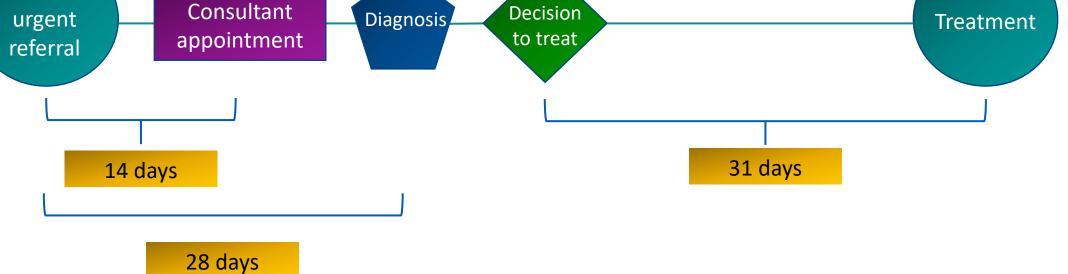
The NHS aims that 85% of patients will wait no more than 62 days between an urgent referral for suspected cancer and first treatment. However, this target has not been met nationally since 2015. From a previous analysis of the haematology pathway in Greater Manchester, we know that patients with lymphoma are less likely to meet this target than patients with other types of blood cancer.

The pathway board co-ordinated audits of the lymphoma pathway to be undertaken at several trusts across Greater Manchester. These were Bolton NHS Foundation Trust, Northern Care Alliance and Manchester Foundation Trust. The results and learning points from the audit at MFT are presented below.

GP

Aims:

To determine if 85% of patients are having a diagnosis of Lymphoma made and treatment commenced within the 62 day target from initial referral via the Suspected Cancer Referral pathway.



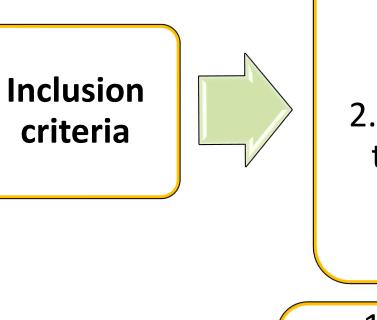
Method:

Patients were identified using Somerset Cancer Register and Chemocare prescribing system. Data collection from patient records/letter, Somerset Cancer Register, MDT outcomes, HODS, Chameleon and Christie PET system. Compared with Department of Health Standards and previous audits in 2017 and 2019

Findings:

44% of patients are being treated within 62 days from referral In 2017 92% of patients were being treated within 62 days In 2019 87% of patients were being treated within 62 days

Only 22% were initially referred directly on a haematology pathway. 100% of these patients were treated within 62 days. Of the 78% of patients who were initially referred to a different speciality only 28.6% of these were treated within 62 days. **Exclusion**



 Date of diagnosis for any type of lymphoma was between 01/01/2022 and 30/06/2022
On a 2WW/62 day from referral to treatment target pathway or upgrade to treatment target

pathway

 Not on a 2WW/62 day from referral/upgrade to treatment target pathway
CLL

3. Patients from Trafford General or Wythenshawe

Discussion:

How can we improve the service?

1. Implementation of a cancer pathway navigator. There are currently no pathway navigators in haematology in Greater Manchester.

Criteria

This new role will monitor every step of the pathway highlighting delays to clinicians as well as providing a point of contact for patients.

2. Improve links with the sarcoma team. This audit highlighted a significant number of patients referred via the sarcoma team (44%) with a mean time from initial referral to transfer to haematology of 49 days. The Haematology pathway navigator will work with the sarcoma co-ordinators to direct patients more likely to have lymphoma to the correct pathway.

3. Work with radiology to improve scan reporting time. Develop a function on HIVE to flag a scan request as on a cancer pathway.

Future work:

To reaudit once the haematology pathway navigator has been in post for 1 year and if this has had a positive impact to encourage support for similar posts in other trusts across GM.

With thanks to Dr Philip Crea, Dr Jane Norman, Dr Nimah Loughran and Ms Rhiannon Blow who undertook this audit and presented the results at pathway board.