

# Greater Manchester Cancer Alliance Metastatic Cancer Care Strategy (Non-emergency)

The Greater Manchester Cancer Alliance EMERGENCY metastatic cancer care strategy is described by the 'Greater Manchester Acute Oncology Transformation Plan: providing high quality acute and emergency cancer care pathways' and supported by the Acute Oncology Pathway Board and the MSCC (Metastatic Spinal Cord Compression) working group

Tumour-specific clinical leadership to be provided through Pathway Boards. Board membership and programmes of work should reflect the aims of the alliance metastatic strategy

## Primary Care and Early Diagnosis

### Patient engagement about signs and symptoms

- Develop patient-facing communication assets around basic understanding of metastatic disease and terminology
- Adopt and adapt SUR-designed metastatic breast cancer symptoms infographic for all relevant tumour groups

### Primary Care education and engagement including:

- Signs and symptoms of metastatic disease
- Impact of early diagnosis of metastatic disease on patient outcomes and avoiding emergency admissions
- Role of primary care in the holistic support of metastatic patients

### Equity of timely access back into the cancer system

- Review and reform the current primary-to-secondary care referral pathway for suspected metastatic symptoms and harness EMIS to provide GPs with accessible digital information
- Explore feasibility of direct access to secondary care for patients with metastatic symptoms e.g. algorithm-led metastatic symptom hotline/AI solutions
- Explore existing resources in localities and their role in supporting timely access back into secondary care e.g. NSS pathways/CDC

## Treatment and Performance

### Ensuring metastatic patients are visible in the data

- Support MDMs to correctly code de novo AND secondary metastatic diagnoses
- Explore the feasibility, and understand the BI requirements, of building metastatic digital fingerprints from event-level data to create a metastatic patient database

### Equity of access to timely clinical decision-making

- Identify and reduce variation of diagnostic turnaround time for metastatic diagnosis and progression
- Develop and test multi-speciality oligometastatic MDMs
- Develop MDM referral guidelines for brain/liver/lung/bone metastases

## Personalised Care

### Applying principles of PSFU to metastatic pathways

- Ensure education/resource offer to patients/staff around diet, exercise, prehab is inclusive of metastatic patients
- Develop EOT alternative for patients living with metastatic disease e.g. COT (Continuation of Treatment) clinics
- Ensure access to psychological support
- Promote NHS and VCSE health and wellbeing support offers to improve reach to the metastatic population
- Expand ETIP (Endocrine Therapy Improvement Programme) to all relevant specialty pathways
- Apply learning from Cancer Improvement Collaborative Project (PC for metastatic colorectal cancer) and WWL innovation project (metastatic patient experience of health care), to the wider system
- Design metastatic pathways within the existing system-wide PSFU digital tracking system

### Genomics

- Ensure equitable and timely access to testing, as per the National Genomic Test Directory

Improve equity of access to clinical trials for patients with metastatic disease

## Workforce and Education

### Metastatic workforce

- Collaborative working with the Christie to regularly review the metastatic workforce (including named keyworkers and psychological support staff), adapting to support new ways of working
- Build on Christie-led initiatives to increase workforce efficiency e.g. EPROMs/Drug-specific clinics/systemwide working
- Build on alliance-led initiatives to increase workforce efficiency e.g. GPCR pilot/clinical admin navigators

### Education Needs

- Scope education needs of patients and staff, building on service user scoping of the Personalised Care team
- Develop resources to support patient, primary care and secondary care metastatic education
- Create training opportunities for staff in communication and psychological support skills

### Communication principles:

Incorporate metastatic patients and language into communication assets and increase person-centred content featuring metastatic patients, including 'primer film' of metastatic patients' experience  
Raise awareness of the Cancer Alliance programme of work to improve metastatic cancer care

