Introduction

As this will be my final UCLH Cancer Collaborative e-bulletin before I move on to join the Shelford Group as its managing director, I would like to take this opportunity to reflect on my time working in cancer at UCLH and across our region.

Since I joined cancer services at UCLH four years ago, there has been a period of rapid change across the region. The centralisation of complex cancer care, the development of the Cancer Vanguard, world leading discovery and translation in our academic partners and the wide range of collaborative service projects provide an important seed of optimism as to what we can achieve together to maximise patient benefit. Increasing involvement of patients, carers, family and the wider public has been another defining characteristic of how our approach to planning and improving cancer care has changed.

Within the west Essex, north central and east London region I have seen that we have great strength in the expertise and commitment of staff working in cancer services across both primary and secondary care. Palpable amongst this community has been a dedication to improving patient outcomes, which has increasingly seen organisational boundaries becoming more porous and embracing of shared learning. The external partnerships with charities, academia and industry have also been important in enabling our NHS to achieve something better for the communities we serve.

It is with a renewed appreciation of what the NHS can achieve together that I would like to thank everyone for their support and collaboration over my time working here.

Nick Kirby, divisional manager and director of UCLH Cancer Collaborative

I would like to thank Nick on behalf of all the trusts and CCGs in our Cancer Collaborative for the excellent leadership and enormous effort he has put into the Vanguard director role. He has helped us share learning effectively to maximise patient benefit and each improve our local cancer services in a coordinated way.

I would like to wish him well in his new role as managing director of
Earlier diagnosis

qFIT colorectal cancer pilot enters second phase
The second phase of our pilots study to see if a simple stool test, known as a qFIT or FIT test, can effectively ‘rule-out’ colorectal cancer in patients with abdominal symptoms has been launched. The study has been extended to a total of 64 organisations (50 GP practices and 14 hospitals) in London and East Lancashire over the next six months. The pilot is supported by NICE and NHS England and has also been selected to become part of the NIHR Clinical Research Network (NIHR CRN) portfolio of high quality studies those have the greatest impact and the potential to deliver the most benefit to patients. For more information visit our blog.

Supporting earlier diagnosis of cancer in primary care
UCLH Cancer Collaborative is working with two prestigious education providers to offer online learning to support primary care staff to diagnose cancer earlier. We have also developed a coding and safety netting online learning package with Macmillan Cancer Support. Read more about our online learning packages here.

#SmearForSmear with West Ham Utd ladies
We worked with West Ham United and Jo’s Cervical Cancer Trust to support the #SmearForSmear campaign during Cervical Cancer Prevention Week (22-28 January). West Ham United ladies football team produced an innovative video to support the #SmearForSmear campaign and encourage all eligible women to have their smear test. For more information click here.

Multidisciplinary diagnostic centre – new site at Royal Free London
We are delighted that a new multidisciplinary diagnostic centres (MDC) has opened at the Royal Free London NHS Foundation Trust. MDCs are for patients with so-called ‘vague’ symptoms that could indicate cancer. These patients need to access appropriate tests quickly to improve early diagnosis. The project is part of the national Accelerate, Coordinate, Evaluate (ACE) Programme jointly funded by Cancer Research UK, Macmillan Cancer Support and the Shelford Group of trusts and hope that we can stay in touch in areas of mutual interest, in particular clinical outcomes that matter to patients.

Prof Kathy Pritchard-Jones, chief medical officer
Highlight Cancer
The Highlight Cancer project focuses on building a network of ambassadors within the community that can raise awareness of cancer locally. As part of the project, we provide a free, practical, down to earth training programme that gives ambassadors more confidence to discuss cancer with people in their community. It’s not a lesson or a lecture, it’s a shared experience that leaves them ready to have simple, yet powerful, conversations. We work with Cancer Research UK to deliver their Talk Cancer training to the ambassadors and support them to share their knowledge once they complete the training. Our next Talk Cancer training session will be held on 13th February 2018 from 1.30pm to 4.30pm. To secure your place, sign up here.

London Cancer

Colorectal cancer pathway
In January Prof Chris Harrison, NHS England's National Clinical Director for Cancer, circulated Clinical Advice for the Commissioning of the Whole Bowel Cancer Pathway. The clinical advice outlined in this document was prepared by the Colorectal Cancer Clinical Expert Group (CEG), chaired by Mr Michael Machesney, consultant colorectal surgeon and London Cancer pathway director for Colorectal cancer, and co-chaired by Mr John Griffith, consultant colorectal surgeon at Bradford Teaching Hospitals NHS Trust. The pan-Vanguard best practice colorectal timed pathway is included in this document. We will be working with our pathway board to understand how these documents relate to our existing practice.

Prostate pathway improvement
North central London has been awarded funding to support improvements in the prostate pathway which is challenging in terms of 62 day cancer waiting times targets. These funds will be used to invest in a proof of concept pilot for network MRI reporting, a surgical school video to support patient decision making regarding treatment, inter-trust referral support and additional surgical capacity. These initiatives need to be delivered by the end of March 2018.

Head and neck MDT improvement
A working group has been established to take forward recommendations from the Gateway 5 review of the reconfiguration of head and neck cancer surgery regarding the two existing specialist MDTs. A workshop is being held on
the 8 February 2018 to gain further input from the network into this.

**Welcomes and farewells**

We would like to thank Mr Simon Whitley for his leadership of the head and neck tumour pathway board. Simon has left the sector and will be taking up a surgical post in Gloucestershire Hospitals NHS Foundation Trust. We would like to welcome Dr Russell Moule, clinical oncologist at UCLH, as the new pathway director for Head and Neck cancer. Also, Mr Edward McKintosh, neurosurgeon at Barts Health, has taken up position as the new pathway director for brain and spine cancers.

**Upcoming events**

Please register via the Eventbrite links below (or search UCLH on [www.eventbrite.co.uk](http://www.eventbrite.co.uk)) or contact us for more details:

- **Head and Neck MDT workshop** – 8 February
- Gynaecological cancer research day – 19 April
- Liver cancer education day - 18 April

We have completed a repeat audit of trust representation on the London Cancer pathway boards to help us work with Trusts to make sure that we have good representation. If you would like a copy of this report please contact us at uclh.londoncancer@nhs.net

**New models of care**

**North east London diagnostic hub**

We are proposing to develop a diagnostic hub providing expertise in cancer diagnostics and surveillance for patients in north east London. The hub will enable innovative cancer diagnostic pathways to support faster and earlier cancer diagnosis, and will also offer training to support the dissemination of best practice. The project is subject to the confirmation of capital funding from the National Cancer Transformation Fund. For more information, or if you’d like to get involved, please contact Emily Collins – details below.

**Early diagnosis industry challenge**

In March 2017, the Cancer Vanguard launched a challenge to industry to work with us on projects to improve the early diagnosis of cancer. Two projects are moving forward with industry partners and should be announced in more detail shortly. A third industry partner is now connected with on-going work led by our vanguard partners in Greater Manchester.
Each project aims to test an innovation to facilitate the earlier diagnosis of cancer on a small scale, with a view to wider deployment should the innovation prove effective.

For more information please contact emily.collins2@nhs.net

Pharma Challenge
The ‘Optimising design of out of hospital services for Denosumab’ project is now complete. The project’s toolkit can be accessed via this link. Our work with Amgen on this project has been shortlisted for a HSJ partnership award.

We are now approaching the close of our second Pharma Challenge partnership, with Bristol Myers Squib (BMS). We have used insights gained from interviews, workshops and data gathering to develop a pathway and accompanying guidance for identifying and managing immunotherapy related adverse events. The project’s outputs will be published in February to coincide with a launch event hosted by BMS.

In our final Pharma Challenge project we have been mapping and appraising out of hospital systemic anti-cancer therapy (SACT) delivery models. The options appraisal document will be published by April and a decision will then be taken about piloting a delivery model.

For more information please contact simon.evans15@nhs.net

Centre for Cancer Outcomes

Identifying missed actionable events in lung cancer
Lung cancer is most common cause of cancer death in north central and east London, where there were 860 new cases and 631 deaths in 2013-14 across. The main reason for poor outcomes in lung cancer is late diagnosis. Furthermore, 42% of lung cancer patients in north east London are diagnosed as part of an emergency presentation and such patients often have later stage cancer and a lower chance of survival.

We need to fully understand why treatment rates and survival are so low for lung cancer in some areas of London so we can improve future services. Led by Prof Mick Peake, the Centre for Cancer Outcomes is working in collaboration with Queen Mary University London and Kings College London on a project proposal to the CRUK Early Diagnosis Advisory Group. Using linked information from
GPs and hospital in Waltham Forest, Newham, City & Hackney and Tower Hamlets, the project aims to identify ‘actionable moments’ by analysing patient-GP interaction in the year before a diagnosis of lung cancer.

Understanding impact of palliative chemotherapy use
Cancer patients nearing the end of their life should be supported to make decisions regarding their own care to live well until they die. However, there is a low level of evidence on the efficacy of many treatments used in this context and even less information on their impact on quality of remaining life. To enable our clinicians to have frank conversations on the risks and benefits of the proposed treatments for cancer patients at the end of life Dr Emma Kipps, clinical fellow at the Centre for Cancer Outcomes, is leading a project to investigate the use of chemotherapy in breast and pancreatic cancers and time spent in a hospital bed in the 90 days before death.

The project is in partnership with Public Health England. By enabling our clinical teams to be one of the first to benchmark against national data, we will support better communication and informed choice on the risks and benefits of continuing/discontinuing treatment and conversations around the transition to end of life.

Capturing outcome measures that matter to patients
The Centre has formed partnership with the International Consortium for Health Outcomes Measurement (ICHOM) to capture the outcomes that matter most to cancer patients. This will focus on implementing the established ICHOM standard sets in lung and early stage prostate cancer, including patient reported outcomes. The team has started process mapping, and piloting the best way to capture patient reported baseline data (around the time of diagnosis).

For more information please contact donna.chung@nhs.net

Macmillan Integrated Cancer Programme

Patient experience and user involvement

Our Patient and Carer Network now has over 60 members. It’s a great opportunity for people affected by cancer to help improve and co-design cancer services. Recently, Patient and Carer Network members have:
- Shared their experiences with GPs and pharmacists, as part of a professional masterclass about cancer
- Shaped publicity materials and the recruitment strategy for a lung cancer screening study
- Participated in interview panels to recruit senior members of staff
- Helped create a series of animated films for patients about blood cancers.

The Patient and Carer Network is open to people who have received cancer treatment at one of the 17 hospitals in the UCLH Cancer Collaborative (please see this map). We are always looking for new members; please help us spread the word by sharing our flyer with patient participation groups, community groups and support groups.

Current opportunities to be involved are listed on our website: www.uclh.nhs.uk/getinvolvedwithcancer If you would like more information about how to get involved, please contact Becky Driscoll by emailing uclh.getinvolvedwithcancer1@nhs.net or phone 020 3447 2787.

Coding and safety netting toolkit workshop
We are hosting a series of workshops for Emis web users in north east London on 6, 13 and 20 March. The session will introduce GPs and primary care staff to electronic safety netting and provide information on how to implement it in your practice. For more information, see our flyer.

Cancer Academy
In November, after a competitive recruitment process, the Cancer Academy welcomed Professor Jonathan Ledermann as its clinical lead. Professor Ledermann is a medical oncologist and is the Clinical Director of the UCL Cancer Institute and Director of the CRUK and UCL Cancer Trials Centre, and brings a wealth of educational, research and clinical experience to the Academy.

In recent months the Cancer Academy has launched several programmes, including a CPD resource for GPs covering eight of the most common cancers. This online resource was developed in partnership with the BMA and is available to GPs working in north central and north east London, and west Essex. A revision course for haematologists undertaking FRCPath part 2 examinations has been oversubscribed, and courses on communications skills, motion-management...
techniques in radiotherapy, and principles of cancer care have all run in late 2017 and early 2018. Uptake of chemotherapy education for adult patients starting their first treatment cycle has increased by 50% since the summer, and is demonstrating benefits including reduction in anxiety about treatment and an increase in feeling informed about treatment. Alongside these projects, the Academy has invested in the development of clinical teaching staff, running train-the-trainer courses and piloting a short-term fellowship programme to support clinicians dedicate time to the development of cancer-related training and education.

Upcoming programmes include piloting a new study day using simulation training to reflect on and improve MDT working, and a ‘cardio-oncology in practice’ study day on the 14 May 2018 for all clinical staff, focussed on managing the cardiac effects of cancer treatment and supporting heart patients through cancer treatment. To book onto this study day, sign up to the BMJ courses, or browse the Cancer Academy’s offer, visit our website www.uclh.nhs.uk/canceracademy

The UCLH Cancer Collaborative is part of the national Cancer Vanguard, working with Greater Manchester Cancer Vanguard Innovation and RM Partners

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