

London Cancer Gynaecological Cancer Tumour Pathway Board Annual Report 2018-19

Introduction

The Gynaecological Cancer Tumour Pathway Board is a cancer specific board led by Dr Alexandra Lawrence, Tumour Pathway Director, with project management support from Caroline Cook. Its membership includes representation from cancer professionals across the region and active participation from primary care and from patients.

We have been leading the quality improvement in ultrasound for suspected ovarian cancer in North Central and North East London and have been gratified to see the excellent attendance and feedback. I look forward to assessing the impact of this intervention over the next 12 months.

Achievements this year

This year the Board have focussed on supporting earlier diagnosis of gynaecological cancers and improving the processes of transferring patients between trusts.

Our key achievements in 2018/19 have been:

- The roll out of International Ovarian Tumour Analysis (IOTA simple) rules training to sonographers and radiologists across trusts in north central and east London. IOTA simple rules is a system of reporting which equips sonographers to identify benign or malignant ovarian cysts at an early stage in the pathway, potentially reducing inappropriate referrals and facilitating earlier diagnosis. It is anticipated that using IOTA simple rules will contribute to meeting the 28 day faster diagnosis standard. 171 sonographers and radiologists have been trained to date at four training events. The training sessions were well received and attendees stated that this has given them the confidence to change their practice. A baseline audit of reporting quality is being conducted and a follow-up audit will be undertaken to ascertain whether reporting has improved following the IOTA simple rules. The format and design of our training is being adopted by the East of England Cancer Alliance for roll-out in 2019/20.
- Sharing best practice, education and knowledge in research. In January 2019, the Board hosted a gynaecology education event for oncologists, clinical nurse specialists, GPs, sonographers and patient representatives. The afternoon attracted more than 45 attendees and provided educational sessions on the use of HRT in women with gynaecological cancers, bowel toxicity and radiotherapy, psychosexual issues and an enhanced supportive care service, currently provided at UCLH. This event was an opportunity to share good practice and provide updates on developments in care, as well as a chance for networking across professions. Feedback from the event was overwhelmingly positive and further education events will be held in 2019/20.
- Members of the Pathway Board were invited to present at the pan-London Faster Diagnosis event and shared methods of improving diagnostic performance.
- Using data to inform improvement. The Pathway Board reviews gynaecological cancer waiting times data at each meeting to understand and identify where there are problems in meeting the 62 day



Alexandra Lawrence, Gynaecology Pathway Board Director, Consultant Gynaecological Surgeon at Barts Health

referral to treatment standard. Additionally, in late 2018, an analysis of inter-trust breach reports was undertaken for north central London trusts, which highlighted factors in the system that consistently lead to delays. This information will be crucial for informing ongoing and future improvement work. The Board also provides clinical input and quality assurance of data

- Improving communications and referrals between trusts. *London Cancer* have facilitated and supported a series of bi-lateral meetings between UCLH and referring Trusts in north central London to understand and resolve issues which cause delays to the 62 day urgent GP referral to treatment pathway. These meetings, chaired by the Director of Performance for the NCL STP, have greatly improved communication between trusts and enabled joint working to find solutions to long running issues.
- Piloting a feasibility study of HPV self-sampling in women who have not attended cervical screening. Areas in North Central and North East London have the worst cervical screening coverage rates in the UK. This collaboration between Kings College London, Public Health England and NHS England will enable us to estimate the uptake and increase in screening coverage with offering self-sampling. The outcome will inform the national screening programme.

Patient representation

We are grateful to have Patricia Jupp and Susan Boyde as patient representatives and greatly appreciate their valuable contribution to the work of the Pathway Board.

“The role of a “patient voice” at Pathway Board level is often limited when major management planning is involved. This was especially the case this year as the clinical, nursing and technical Board members planned how to deliver the new 28-days-from-urgent-referral-to-diagnosis target with their limited resources. Nonetheless our views are always asked, and it was good to contribute to clear non-frightening information leaflets for patients explaining the 2-week urgent referral pathway and on the problems of lymphoedema, for use across the network.”

Susan Boyde, Patient Representative

Future plans

In 2019/20, the Gynaecology Pathway Board will focus on supporting trusts to be ready for the implementation of the 28 day faster diagnosis (FDS) standard in April 2020. Evaluation of the impact of initiatives introduced in 2018/19, such as the IOTA training for sonographers, will be ongoing and improvements to the delivery of key standards using audit and cancer waiting times data will continue.

No	Objective	Owner	By
1	MDT improvement In line with the ongoing MDT improvement programme across all tumour sites, the Board will develop MDT protocols for at least one MDT.	AL	March 2020
2	Health promotion To promote health and wellbeing events to all women following treatment of gynaecological cancer.	AL/ALL	March 2020
3	IOTA training evaluation via GP audit IOTA simple rules training was delivered to sonographers across NCEL in 2018/19 to support earlier diagnosis of ovarian cancer. A baseline audit was undertaken to assess the	AL/CC	October 2019

	standards of reporting before training and this will be repeated in June 2019 to quantify any improvements to reporting quality following training.		
4	Endometrial cancer surgery audit Minimal access surgery for endometrial cancer will be audited prospectively for all hospital sites across NCEL through June and July. NICE guidance recommends that women should be offered laparoscopic surgery for endometrial cancer and the audit, supported by the Pathway Board, will assess the capabilities of trusts in NCEL to support this. Findings will be presented back to the Board in the autumn.	AL/ALL	October 19
5	Using data to improve the pathway The Pathway Board will continue to review cancer waiting times data including the new faster diagnosis standard data and target interventions based on the data available to improve performance on the pathway.	AL/CC	Ongoing
6	Education event Following the success of the Gynaecology Education event in January 2019, a further event will be organised for January 2020. The event will aim to share developments in the care of Gynaecology patients, best practice and updates on projects overseen by the Pathway Board.	AL/CC	January 2020
7	Refresh membership The membership of the Pathway Board will be reviewed and refreshed to ensure clinical and operational engagement from all NCEL Trusts and to maintain high attendance levels. Patient representation on the Pathway Board is being reviewed separately as part of a PPI project across all Boards.	AL/CC	June 2019

Acknowledgements

We would like to thank all the members of the Gynaecology Cancer Tumour Pathway Board for contributing their time to Tumour Pathway Board meetings and projects outside the meeting.

Particular thanks to our patient representatives, Patricia Jupp and Susan Boyde, who have generously given up their time to contribute.