

## London Cancer Lung Tumour Pathway Board Annual Report 2016-17

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### Introduction

*London Cancer* is the integrated cancer provider system formed in 2012 to cover the geographical areas of North Central and East London and West Essex, population of 3.7 million.

*London* was integrated into the newly formed UCLH Cancer Collaborative in September 2016, as one of six key work programmes.

#### *Cancer*

The Lung Tumour Pathway Board, led by a Pathway Director, is responsible for driving improvement across the whole care pathway. The Board's membership includes multi-disciplinary representation from cancer professionals across the region and active participation from primary care and from patients.



The role of each pathway board is to understand any variation in practice and set standards that take advantage of planning whole pathways of cancer care for a large population. This drive to improve cancer care for patients covers an integrated care pathway that extends from presentation and diagnosis through to palliative care and living with and beyond cancer.

The lung pathway director Sam Janes has reflected on the previous year:

*After decades of very little progress in lung cancer care we are now in a situation where we have novel new treatments, strong evidence for the positive benefit of holistic care and perhaps most importantly, with the use of CT Screening, we could in the near future really save lives and make lung cancer a curable disease.*

### Achievements this year

2016/17 has seen the Lung Tumour Pathway Board become part of the newly formed UCLH Cancer Collaborative. Working as part of the national Cancer Vanguard within the New Care Models programme of NHS England this has allowed us to consult closely with colleagues within Greater Manchester Cancer Vanguard Innovation when developing new ways of working that will deliver the national CRG optimal lung pathway.

This year we have had a focus on improving earlier diagnosis and making the stage at diagnosis as low as possible.

Our key achievements have been:

- Conducted a full gap analysis against the national optimal pathway giving us a full understanding of where we need to focus resources and efforts to deliver said pathway.

- Held a data evening with representatives from across London, including the NLCA, NHS England and The Centre for Cancer Outcomes. The evening was focused on where we as a collective need to take action to improve data quality.
- Using intelligence gained from the gap analysis and collected data to begin Trust consultations with a view to creating an action plan that can deliver the national pathway by December 2017.
- Our members have inputted on planning for a potential up scaling up of our low dose lung CT screening pilot and lung health check pilot
- Signing a contract with International Consortium for Health Outcomes Measurement (ICHOM) to implement their Lung dataset in UCLH and Barts.

## Future plans

In 2017/18 we will build on our work to achieve earlier diagnosis of Lung Cancer.

No	Objective	Owner	By
1	Implement the national optimal pathway by December.	All	Dec 17
2	Using learning from the gap analysis and national pathway work achieve compliance with 62 day targets by September.	All	Dec 17
3	Implement the ICHOM dataset in UCLH and Barts	Navani/Peak	Dec 17
4	Design and fund a UCLP wide CT Screening trial	Janes	Early 18

## Acknowledgements

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

Particular thanks to Dr Neal Navani for kicking off our best practice pathway work and to Dr John Conibear and Neal for leading the ICHOM implementation work.