



NHS NORTH WEST LONDON ICS - MESSAGE TO ALL NWL GP PRACTICES

23rd June 2025

This cancer GP bulletin contains updates for GPs and their practice staff on the following:

MAXIMISING EARLY CANCER DIAGNOSIS

- 1. IMPORTANT: Ensuring that patients are available for 28 days following referral onto Urgent Suspected Cancer (USC) pathway ALL GPs
- 2. IMPORTANT: Removal of outdated two week wait referral forms ALL GPs / PRACTICE MANAGERS

CANCER SCREENING

- 3. IMPORTANT: Breast Screening Routine Breast Screening Electronic PDF Report "Opt In"
 - ALL PRACTICE STAFF
- Reminder: Using the WSIC data dashboard for Cervical and Bowel Screening ALL PRACTICE STAFF
- 5. Love your Cervix campaign ALL PRACTICE STAFF

HPV VACCINATION

 Information available to support increased HPV Vaccination uptake – ALL PRACTICE STAFF

REFERRAL FORMS

IMPORTANT: ENSURING THAT PATIENTS ARE AVAILABLE FOR 28
DAYS FOLLOWING REFERRAL ONTO URGENT SUSPECTED CANCER
(USC) PATHWAY

FOR INFORMATION AND ACTION ALL GPS

 As we approach holiday season, it is important to remind patients of the requirement to be available for 28 days, following decision to refer on an urgent suspected cancer (USC) pathway.





- USC forms were amended to state that patients should be available within the <u>next 28</u> days (rather than 14 days), in line with the updated standard (October 2023 <u>NHS</u> England » Cancer).
- This change reflects the national shift away from the 14-day standard, with the focus now on achieving a diagnosis, cancer or non-cancer, within 28 days of referral.
- The USC form is reinforcing the expectation that GPs confirm patients are available to attend appointments within this 28-day period, to support faster diagnosis delivery.

It is not about scheduling the first appointment within 28 days, but rather ensuring patient availability throughout that timeframe to facilitate timely diagnosis.

Primary Care Actions

 Ensure that patients are aware of the requirement to be available for 28 days following referral on an urgent suspected cancer pathway.

IMPORTANT: REMOVAL OF OUTDATED TWO WEEK WAIT REFERRAL FORMS

FOR INFORMATION AND ACTION ALL GPS AND PRACTICE MANAGERS

- The pan-London Urgent Suspected Cancer (USC) referral forms (previously known as Two Week Wait referrals) were last updated in October 2024.
- GPs in all London boroughs are advised to use the pan-London USC referral forms when
 referring patients with a suspected cancer, as they contain the <u>updated guidelines from
 NICE published in 2015 (NG12)</u> as well as additional tumour-specific referral criteria and
 deviations which have been agreed for the London area.
- Updated referral forms have been uploaded to the IT system that you use by NWL IT, borough GP IT Leads or by DXS. The forms can also be accessed through the <u>Transformation Partners in Health and Care website</u>.
- We have been made aware of outdated referral forms still being used to refer patients on an urgent suspected cancer pathway which may not include all the necessary information required for effective and timely referral
- It is important that only the updated USC referral forms are used for referral to USC pathways. Please ensure that any old forms or templates are removed from your IT system and are no longer used for patient referrals.

Primary Care Actions

 Delete old forms / templates from your clinical system as these are no longer used for patient referrals.





IMPORTANT: BREAST SCREENING - ROUTINE BREAST SCREENING ELECTRONIC PDF REPORT "OPT IN"

FOR INFORMATION AND ACTION - ALL PRACTICE STAFF

- The London Breast Screening Programme Administration Hub, hosted by Royal Free NHS Trust, are responsible for the issuing of GP outcome reports from the NHS Breast Screening Programme (NHSBSP).
- At present, these reports are generated by the National Breast Screening System (NBSS) and sent to GP Practices in printed and posted format.
- We are looking at changing the sending of Breast Screening GP reports from Paper to Electronic PDF. If any patients are called for screening, we plan to send GP Practices results by email PDF link attachment, rather than a posted paper result. The content/layout of the GP reports will remain unchanged.
- The key benefits of this change will be faster, streamlined and secure delivery of results via NHS.net email.

PDF links <u>not accessed</u> within 72 hours will revert to that particular batch being sent by the defaulted method of printed post.

- In order to **OPT IN** for this change, we request that your GP practice complete and return the following information to **rf-tr.hubgppacks@nhs.net**
 - o GP Practice Code and GP Practice Name
 - o Confirmation of preferred NHS.net email for reports to be sent
- GP practices that have <u>not</u> opted in for electronic GP result reports will continue to be sent breast screening reports via printed and posted format.
- Should you have any questions or queries please contact the below:

Danielle Macpherson-Smith (Service Manager)

Tel: 020 7794 0500 (27366)

Primary Care Actions

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REMINDER: USING THE WSIC DATA DASHBOARD FOR CERVICAL AND BOWEL SCREENING

FOR INFORMATION - ALL PRACTICE STAFF

Developed through partnership working between the NWL IB team and RM Partners
Cancer Alliance, the <u>cervical and bowel screening dashboards</u> has been developed to
support NWL PCNs and the ICS review their cervical screening data at borough, PCN
and Practice level to identify populations for specific focus and intervention.

These dashboards are key to meeting Early Cancer DES requirements in relation to screening and supporting reduction in health inequalities (minimum expected threshold is 60% for all practices and populations)

The Screening Dashboards includes Screened and Not Screened by:

- Screening Cohort (age)
- Health Borough
- Primary Care Network
- GP Practice
- Gender (for Bowel)
- Deprivation
- Ethnicity
- Long Term Condition

Cervical Screening -

Although screening data on the cervical screening dashboard is extracted from S1 and EMIS, the data / numbers shown on the dashboard **will be different** to that shown on practices' clinical systems, due to practices being able to code patients not screened (exception reporting) for reasons acceptable for QOF purposes such as:

- having had a screen outside of the NHS setting
- declining the test
- not responding after three invitations

which is not reflected in the WISC data.

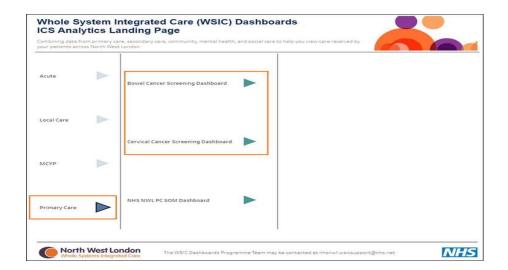
The dashboard is primarily a population health management tool supporting primary care in carrying out focused interventions with specific population cohorts.

The cancer screening dashboards are available through the landing page under the Primary Care menu - alternatively you can view the dashboards available via <u>link</u>. Alternatively, please copy this url on your browser:

https://wsicanalytics.nw.london.nhs.uk/#/site/ICSAnalytics/views/LandingPage/Homepage?:ii d=1







LOVE YOUR CERVIX CAMPAIGN

FOR INFORMATION - ALL PRACTICE STAFF

- A dedicated <u>online resource</u> developed by colleagues in the South-East as part of a campaign to raise awareness of cervical screening and encourage attendance, especially among younger women, is being shared for all GP practices to use.
- Please visit the <u>webpage</u> and use the password LoveYourCervix2025.
- Launching today, the 'Love Your Cervix' campaign will also address barriers to screening through education, resources and community outreach. Campaign materials are now available to download and use. If you have any questions, please email england.secomms@nhs.net.

HPV VACCINATION INFORMATION AVAILABLE TO SUPPORT INCREASED HPV VACCINATION UPTAKE

FOR INFORMATION - ALL PRACTICE STAFF

- One of the key components of the RM Partners Strategy for 2025-2030 is to increase the uptake of the HPV vaccine across our 14 boroughs in north west and south west London.
- Since COVID the uptake of the first dose of the vaccine in schools has dropped considerably. RM Partners is working with our stakeholders and partners to raise awareness of the importance of this potentially lifesaving vaccine.





 The RM Partners website contains information on the HPV vaccine from a number of sources (this is being updated w/c 23rd June) these can be shared via GP practices and engagement events.

HPV vaccination - RM Partners

 The presentation contains some information on what role primary care can play in increasing uptake of the vaccine.

HPV Vaccine in primary care	PIF
	HPV vaccine in primary care NWL.pc