

# Early Cancer Diagnosis – Quality Improvement Projects

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#letsbeatcancertogether



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PCN with a total of 33,000 patients

3 surgery sites in semi-rural area

Training practice

Approximately 60 2WW referrals a month

NCDA 2020 - SN major area for improvement

**SAFETY NETTING**

# CRITERIA AND PERFORMANCE THRESHOLD

3/12 search of all patients referred on a 2WW pathway, we then randomly audit 30 patient notes for safety netting

The initial aim was for an improvement on 28.8% and we are now continuing the audit cycle to ensure sustained improvement

A presentation was given to the PCN

CRUK safety netting training

Introduced Ardens safety netting template for all 2WW referrals

Information was shared on how to use the Ardens template

**METHODS**

## Ardens Fast Track Safety Netting Template (v14.5)

Pages



Referral Tracking

Diagnostics Tracking

Symptom Safety-Netting

COVID19 requirements

Seen in fast track clinic

Referral Guidance

Template Information

Learning points

### Fast-track Referral Tracker

Please use this page of the template to record when you have made a Fast-track referral.

This will activate the safety-netting tool.

**The PCN DES requires the following code to be added if referring for suspected cancer:**

Cancer safety netting

No previous entry

Please confirm which Fast-track clinic you have referred the patient to using the options below:

Fast track cancer referral:

No previous entry

Rapid access chest pain referral

No previous entry

Only use the following tick box for cases where the likely primary site is unknown.

Fast track cancer referral (generic / unknown primary)

Text

No previous entry

### Fast-track referral declined / rejected

Please use **ONE OF** the following tick-boxes to REMOVE the patient from the Ardens Fast track safety netting system. (This will cancel any safety-netting alerts for ALL cancer AND rapid access chest pain clinic referrals made).

Inappropriate referral

Text

No previous entry

OR

Referral declined by patient

Text

No

Please ensure the patient is aware of what this means.

Possible diagnosis has been discussed and the importance of the referral.

Text

### Information on 2WW given to patient

DUCK, Donald (Mr)

▲ No ethnicity recorded

▲ COVID-19: Group 2 for vaccination

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**OR**

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Text

### Information on 2WW given to patient

**This section is optional and has been provided to record what discussion around the referral has taken place.**

[Patient information for urgent referrals](#)

Provision of written information about cancer

Text

No previous entry

The patient has been advised that they will need to attend an appointment within the next 2 weeks and has confirmed they will be available for this

Text

Possible cancer diagnosis has been discussed and the importance of attendance to the appointment within 2 weeks has been discussed.

Text

# RESULTS

	NCDA National 2020	NCDA WG 2020	June 2021	Sept 2021	Dec 2021	March 2022	Feb 2023	Sept 2023
Use of Safety Netting	33.9%	28.8%	90%	70%	73%	96.7%	90%	85%

Team Feedback

Clear improvement in safety netting

Admin support

CONCLUSION

Maintain levels of SN

Incorporate training into induction programmes

Extend the use of the Ardens safety netting template to include diagnostic tracking

**RECOMMENDATIONS**



**QIP**  
**CERVICAL SCREENING IN LGBT TRANSMAN & NON-  
BINARY POPULATION**

## AIM

To improve patient experience and uptake of cervical screening, reducing any inequalities in LGBT, Transman & Non-Binary population

# METHOD

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Initial search

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Spreadsheet

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Established if cervical screening due

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Patients directly contacted

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Continual audit cycles

# RESULTS

16 patients  
identified across  
Westongrove

6 patients within  
smear test age

4 patients were  
up to date with  
their smear test

2 patients had  
never had a  
smear & were  
contacted

1 patient has now  
had their smear  
test

1 patient  
cancelled  
appointment and  
re-contacted

# ACTION

**Video link:** [Family Planning & Female Health | Westongrove Partnership](#)

**Newsletter:** [LGBT cytology Newsletter.docx](#)



# RE-AUDIT RESULTS

We now have 11 patients aged 13-21 years and 9 aged 25-64yrs

Out of the eligible 9 patients, 7 are up to date now and 2 are to be invited.

Ongoing project with a search every 3/12

We have ensured these patients have an alert - male name, has a cx for smear recalls

# CONCLUSION AND RECOMMENDATIONS

Effective QIP

Simple search

Individualised supportive care

Increased staff awareness