

**April 2025**

**\*NEW\* Calderdale Cancer Transformation Lead**

Lucy Rogers has joined the ICB, in association with West Yorkshire and Harrogate Cancer Alliance and Calderdale Cares Partnership, as Calderdale Cancer Transformation Lead. She has 25 years NHS and cancer care experience in both clinical and leadership roles and is now looking forward to driving improvements across the cancer pathways (early diagnosis, screening, referrals and inequalities).

*“By working hand-in-hand with primary care, community partners, and system leaders, I’m committed to ensuring more people in Calderdale are diagnosed earlier and experience better outcomes, wherever they live and whoever they are.”*

Lucy can be contacted via email: [lucy.rogers25@nhs.net](mailto:lucy.rogers25@nhs.net)

**Practice Cancer Links**

It would be great to have a point of contact in each practice for all things cancer-related. You may have different people who lead on different aspects of cancer (e.g. FIT pathway, screening, cancer care reviews). It would be really helpful to make contact with the appropriate clinical and non-clinical staff to ensure that relevant communications are channelled in the right direction with no unnecessary cluttering of email boxes. Please click [**here to complete a quick form**](https://forms.office.com/Pages/ResponsePage.aspx?id=slTDN7CF9UeyIge0jXdO42vQ-PfljMpJiiaCd8YwLPtUMFVOUUpQUEVDV0RGUURUTU1VVE9RRlVTVS4u) with the appropriate details. Thank you.

Alternatively, for this – and anything else cancer-related – please email me: [eilidh.gunson2@nhs.net](mailto:eilidh.gunson2@nhs.net)

**Cancer Screening**

**Cervical cancer screening:**

**Cervical screening vials \*\*IMPORTANT\*\***

****A recent memo has come out from Gateshead Health highlighting the need to check the expiry date of vials used for cervical screening. A recent audit has shown that 90 samples were rejected due to the vial being out-or-date. The need to repeat any smear test is not ideal but, for women who struggle to attend or engage with cervical screening, the impact is even more significant. Gateshead pathology service asks that the smear taker ensures that a vial has a minimum of 2 weeks (and ideally 4 weeks) left before expiry. We’re also asked to ensure that the expiry date is not obscured by the patient label. Please could you pass this to smear takers within your practice to avoid women having to undergo re-testing. Thank you.

**From the Primary Care Bulletin**

* [Cervical cancer elimination by 2040 – plan for England](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fprimarycarebulletin.cmail20.com%2Ft%2Fd-l-sdjnul-juiktuiddi-j%2F&data=05%7C02%7Ceilidh.gunson2%40nhs.net%7Cd172210b0cda4a41695c08dd7b2873fa%7C37c354b285b047f5b22207b48d774ee3%7C0%7C0%7C638802135856313331%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=YwWjJkwd5Vl0uWTVgFuUWkIe0B4LSjsw8kQMjIJz3Uo%3D&reserved=0) - looking at improving equitable uptake and coverage across HPV vaccination and cervical screening, moving towards the elimination of cervical cancer by 2040.
* [](https://outpatients.org.uk/tnbgd-screening/)Cervical screening opt-in process for transgender and non-binary people – GP practices are encouraged to identity eligible patients and invite them to discuss the opt-in. A guide is available on [FutureNHS](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fprimarycarebulletin.cmail20.com%2Ft%2Fd-l-sdjnul-juiktuiddi-t%2F&data=05%7C02%7Ceilidh.gunson2%40nhs.net%7Cd172210b0cda4a41695c08dd7b2873fa%7C37c354b285b047f5b22207b48d774ee3%7C0%7C0%7C638802135856334275%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=mq2SVfKBRU6cOPTF2OgLRnSAM2iWqiAmfgyYDCBm2MQ%3D&reserved=0) (login required).

This would also provide an ideal opportunity to explore eligibility and preferences for breast screening. Click on the Outpatients logo for information on screening in the transgender and binary population.

**Breast cancer screening**

****The breast screening unit will shortly be leaving B&Q Halifax. Units will be at Todmorden Health Centre and Tesco Brighouse and invitations will be going out to women registered with Hebden Bridge Group Practice and The Northolme Practice. All invitations now will be timed appointments with no need for women to ring and book. Contact [Eilidh](mailto:%20eilidh.gunson2@nhs.net?subject=Breast%20screening) or Pennine Breast Screening if you have any queries.

**Bowel cancer screening**

Gateway C has a good (CPD accredited course) on [**bowel cancer screening**](https://www.gatewayc.org.uk/courses/national-screening-programmes-bowel-screening/#access_course) – specifically looking at ways on increasing uptake though engagement and reducing inequalities.



**April 2025**

**Cancer Awareness Month (May)**

May is **melanoma and skin cancer** and **bladder cancer** awareness month.

Useful resources for information and promotion can be found below and in the accompanying attachments:

**Bladder cancer**

**Bladder cancer awareness** [**toolkit**](https://worldbladdercancer.org/wp-content/uploads/2025/03/WBCPC-BCAM-Toolkit-2025-1.pdf)

**Macmillan** [**resources**](https://www.macmillan.org.uk/cancer-awareness/bladder-cancer-awareness-month)

**Skin cancer**

**CRUK skin cancer**

[**website**](https://www.cancerresearchuk.org/about-cancer/skin-cancer)



**Spot the Drop game**

(scan the QR code)

**Living with and beyond cancer**

**Cancer Care Reviews**

Cancer Care Reviews (CCRs) are no longer part of QOF. This raises the opportunity to consider how you will continue to offer the valuable holistic support to patients with cancer – but without the time restrictions of QOF. Options to consider are:

* Continue 3m and 12m CCRs as you already have been doing – established processes are in place, but the QOF searches you may have used will no longer be available
* Involve the personalised care teams (Care Coordinators and Social Prescribers) in providing the reviews. Some of you have already adopted this approach with great success and positive feedback.
* A combined approach of clinical and personalised care assessment and review

**CCR Audit**

While the PGPA CCR audit is not yet complete, early patterns suggest that, for most patients, there is no clinical need at the time of review. The assessments carried out by the personalised care team (PCT) are generally more holistic in nature and result in more signposting to support services. Early impressions from the audit would suggest that an approach involving PCT could free up clinical appointments, while continuing to provide a comprehensive patient review.

If you would like me to be involved in exploring the future of CCRs in your practice or PCN, please let me know.

**Breast Cancer Now**

**Online forum**

Breast Cancer Now provides free support to those with breast cancer.

**Free helpline**

Click on thelogo to find our more. Their services include:

* Support for those with primary breast cancer
* Support for those with secondary breast cancer
* Health information
* Access to advice from specialist breast cancer nurses

**[](https://breastcancernow.org/about-us)**

**Online confidential messaging**

**Learning Resources (PDP approved)**

[](https://www.gatewayc.org.uk/)This is an excellent free resource to support GPs, clinicians, and students by providing innovative and evidence-based information, aimed at assisting early detection of cancer. Click on the logo to access the various resources.

The most recent update is on [**uterine cancer**](https://www.gatewayc.org.uk/courses/uterine-cancer/) (PV bleeding as a red flag)

**If you have any comments or questions, please get in touch:**

[**eilidh.gunson2@nhs.net**](mailto:eilidh.gunson2@nhs.net)