

Rapid Diagnostic Service Plan for Gynae

Peninsula Cancer Alliance



Rapid Diagnostic Services

- The Rapid Diagnostic Service Programme is funded over 5 years and designed to speed up cancer diagnosis across every pathway and support our ambitions to achieve earlier diagnosis, with improved patient experience, for all patients with cancer symptoms or suspicious results.

Service Proposal for Gynae

- PMB Rapid Diagnostic Clinics (RDC)
- Self referral from GP onto PMB RDC
- PMB RDC off site (link into CDH programme)
- Cervical Screening drop in centres
- Primary Care advice and guidance (general gynae)
- Navigator to support links between NSS / PMB
- Training academy for Ultra Sonography

PMB Rapid Diagnostic Service



Improved Service

Ambition: Symptom based referral criteria.
Faster diagnosis standard consistently met.
Improved patient experience. One stop clinic.
Consistent service across the Peninsula

What this service is not: A couple of 2ww slots
on another clinic.

Diagnostic Tests offered

- Abdominal and Pelvic examination
- Speculum examination
- Trans vaginal ultrasound scan
- Hysteroscopy
- Pipelle Sampling
- Endometrial biopsy or removal of polyps
- Blood tests

Staffing required

- Specialist Nurse Hysteroscopist or Clinical Operating Practitioner.
- Ultra-Sonographer
- Gynaecology Nurse Specialist
- Phlebotomist

PMB Rapid Diagnostic Service

Clinic Format - Overview

- All patients will have an appointment and information leaflet sent to them. Informing them of the reason for referral and information about their appointment.
- A nurse led consultation including counselling and written consent will occur prior to further investigation in the Unit.
- Sonographer will discuss and undertake the Ultrasound
- The Clinical Operating Practitioner will explain next diagnostic procedure in detail to the patient and written consent will be obtained.
- The Clinical Operating Practitioner prior to performing any examination will assess the general health status of all patients.
- The Clinical Operating Practitioner will perform a hysteroscopy / pipelle biopsy as per protocol.
- During hysteroscopic examination digital images of the uterine cavity and any abnormalities seen will be documented (if available).
- Endometrial biopsy will be performed as per protocol
- All biopsies will be sent for histological analysis
- The Clinical Operating Practitioner will debrief the patient
- The Clinical Operating Practitioner will dictate letters to the GP at the end of each clinic.
- The patient and the GP will be informed of the results within two weeks.

Cervical Smear Drop-In Centres



Equal access

Ambition: To ensure equal geographic access across the Peninsula

- Target highest risk areas for low uptake and identify site for clinic
- Drop in centres offered from Tiverton & RDE
- Proposal to also offer x3/5 clinics in PCA
- Opportunity to innovate and integrate with PMB RDS clinics
- Equality of access targeting groups with protected characteristics

Tiverton Smear Clinic.

- RDE have offered this service from October 2018 in Tiverton
- 1 clinic per week staffed by nurse and auxillary
- Process: DOS and governance sign off, arrangement of staffing and advertising and linking up to GP practices
- Approximate cost £7000 for staff and travel time and mileage from main base.

General Gynae Primary Care Advice and Guidance



Advice and Guidance

Ambition: To improve referral quality and provide guidance for example:

- How to manage patients with a raised Ca125 with a normal pelvic scan, for whom there is no good-fit pathway currently
- Advice on CA125 cut-off range and interval for checking (Willie Hamilton to advise)

Actions for the SSG

- Agree PMB Clinic specification (e.g referral criteria for PMB, diagnostics offered, staffing requirements and clinic)
- Cervical smear drop in centres specification
- Advice and Guidance for primary care

How would you like to take this forward?