Primary care and cancer matters: does it?

Karen Llewellyn-Date1, Dr Richard Roope2
CRUK, ‘CRUK & RCGP

Introduction
It is perceived by some that cancer is a specialist topic and that primary care has a limited role in supporting a patient’s cancer pathway, and education in this area is limited to red flag symptoms only.

In 2018/19 CRUK and RCGP developed a tailored offer in partnership with Health Education England Schools of Primary Care to support ‘Primary Care and Cancer Matters’ training for GP trainers providing relevant evidence based education aligned to RCGP curriculum.

Methods
Four workshops were delivered in the South West and East Midlands prioritising the following key learning points:
1. The importance of behaviour change in primary care to reduce their patients’ cancer risk, preventing 4 in 10 cancers[1].
2. To improve understanding of how early detection of suspected cancer allows for better treatment options and improved survival outcomes, particularly for lung and bowel cancer[2].
3. To raise awareness (through clinical case studies) of the Recognition and Referral of Suspected Cancer guidelines 2015 (NG12).
4. Knowledge of the efficiency of diagnostic tests and the importance of safety netting for patients with low but not no risk of cancer (positive predicted value of less than 3%):
   - Quantitative faecal immunochemical tests (FIT) to guide referral for colorectal cancer in primary care (DG 30).
   - Chest X-rays false negative of up to 23%[3].
   - The role of safety netting advice and processes in primary care.
   - Advise on screening tests and primary care support to increase uptake of FIT screening in hard to reach populations to reduce health inequalities.
5. Signpost to a range of tools and education to support GP trainers/GP trainees to better understand primary care and cancer matters.

Results
2 GP TTT East Midland workshops - Leicester 13/09/18 and Nottingham 25/11/18.
2 GP TTT South West workshops - Cheltenham 17/01/19 and Devon 28/2/19.
In 2018/19 a total of 142 GP trainers over 4 workshops in England.

<table>
<thead>
<tr>
<th>Number</th>
<th>Knowledge (net % change pre/post rating)</th>
<th>Behaviour (% post evaluation)</th>
</tr>
</thead>
<tbody>
<tr>
<td>GP trainers</td>
<td>NG12 implementation</td>
<td>Smoking interventions</td>
</tr>
<tr>
<td>Leicester</td>
<td>18</td>
<td>53</td>
</tr>
<tr>
<td>Nottingham</td>
<td>29</td>
<td>58</td>
</tr>
<tr>
<td>Gloucester</td>
<td>65</td>
<td>83</td>
</tr>
<tr>
<td>Devon</td>
<td>26</td>
<td>72</td>
</tr>
<tr>
<td>Average (4 workshops)</td>
<td>37</td>
<td>67</td>
</tr>
</tbody>
</table>

Figures 1 and 2. GP Train the Trainer Evaluation 2018/19

Conclusion
GP trainers are experienced GPs, with at least 5 years clinical experience, and require relevant and evidence based clinical updates to support their educational role.

The benefit of collaborative working of all partners ensured relationships were forged regionally and ongoing support was sustainable to maintain updates relevant to practice.

Key outcomes included:
- Increased participation in the National Cancer Diagnostic Audit.
- Requests to access a Cancer Research UK Facilitator to arrange a practice visit or access practice-based training sessions.
- Better understanding of the range of free bitesized learning available.
- How to access the research and evidence to improve cancer outcomes.

In 2019-20, CRUK and the RCGP is supporting GP Train the Trainer workshops in partnership with HEE Wessex, HEE Thames Valley and HEE Kent, Surrey and Sussex. Presentations and support materials form the workshop are free available online from cruk.org/GPTrainer.

If you are a Head of Primary Care or Head of GP School and would like to request a workshop in 2020/21, please do email primarycare@cancer.org.uk.

References
2. Cancer screening in England: ONS/PHE 2019

Together we will beat cancer