

North Central London Cancer Prevention, Awareness and Screening

Strategy summary 2023-28



Introduction

The cancer prevention, awareness and screening strategy was first drafted in 2019/20 by North Central London Cancer Alliance and its partners to set the direction and priorities for North Central London (NCL) on these topics.

We are now well into delivery of the strategy and it is being refreshed to align with the evolving health and care landscape, to reflect the current status of services and impact of the pandemic and to draw on learning from work already delivered. This summary document outlines the key areas of focus. The action plan is detailed in the full version of the strategy.



This updated strategy and action plan provides health, social care and community organisations across NCL, who are working to improve the earlier diagnosis of cancer, with information to inform the design and delivery of initiatives.

The overall aim of the strategy continues to be supporting delivery of the NHS Long Term Plan cancer ambitions by 2028 as well as that of the NCL cancer system - **diagnosing 75% of cancers at stage 1 and 2** and for each year, **55,000 more people to survive for five years** or more following a cancer diagnosis.

The 2019 NHS Long Term Plan sets out two ambitions for cancer by 2028



75%
people with cancer
will be diagnosed at
stage 1 and 2



55,000
more people to survive
5+ years

Our objectives are informed by the modelling carried out by NHS England and Cancer Research UK, which estimates the impact on early diagnosis rates of relevant interventions. Additionally, latest data and progress on delivery of the strategy, further informs our aims and objectives for the next five years.

Whilst the strategy focuses on prevention, awareness and screening, we recognise a need for alignment with interventions that identify people with an increased risk of cancer, as they are closely linked to the screening programmes or target a similar demographic. These include liver cancer case finding and surveillance and Lynch Syndrome testing and surveillance.

...we recognise a need for alignment with interventions that identify people with an increased risk of cancer



Context

Population profile

North Central London has a diverse population.

About 60% of residents in NCL come from White ethnic backgrounds, about 20% Asian and 20% Black. Barnet and Camden have larger Asian communities, whereas Haringey and Enfield have larger Black communities.

Ethnicity

60% White
20% Asian
20% Black



There is a high level of population health need and inequalities across NCL. People living in the most deprived areas are more likely to be diagnosed with cancer, and at a later stage of disease for some types of cancers.

1.8 million
residents live in NCL

5 boroughs

Barnet
Camden
Enfield
Haringey
Islington

200,000
people living with a disability

25% of people do not have English as their main language

Cancer incidence

North Central London in 2020/21
297 new cancer cases per **100,00**

England in 2020/21
456 new cancer cases per **100,000**

Cancer diagnosis

North Central London in 2021/22
2,784 new cancer cases referred through the urgent suspected cancer pathway

983 emergency presentations

Cancer mortality

Cancer causes about than **1 in 4** of all deaths in the UK. **NCL (22.6%)** has a lower mortality rate when compared to **England (24.3%)** in 2021.



Cancer screening



Bowel screening

In 2022, the coverage in NCL was below the England average 70.3%, ranging from **57% in Camden** to **63.5% in Enfield**.



Breast screening

In 2022, the highest breast screening coverage rates were in **61.9% in Barnet** and the lowest were **46.9% in Islington**. Levels of coverage across all NCL boroughs were significantly lower than the England average of 64.9%.



Cervical screening

Screening coverage is lower amongst 25-49 year olds compared to 50-64 year olds. In 2022, **Enfield 63.9%** and **Haringey 59.4%** had the highest coverage in the 25-49 age group, which was above the London average 53.9%.

74% in Enfield and **71.2% Haringey** also had the highest coverage in the 50-64 age group.

Targeted Lung Health Checks

The NCL lung health checks programme is still at an early stage. **Uptake is around 30%**, which is below the national average and target of **50%**.



Context

Prevention

- In NCL, **smoking prevalence is 11.4%**, which is similar to the London average and below the England average.
- About **1 in 2 adults have excess weight** in NCL.
- There is an **increased rate of alcohol consumption** in NCL since the COVID-19 pandemic.



Awareness of cancer



Between 2018 and 2020, the **Cancer Awareness Measure Survey** was carried out to gain local insights on the public's awareness, to inform improvement initiatives.

4,755 respondents completed the survey and their awareness of key themes is shown opposite.

Respondents were aware of the following signs and symptoms of cancer

(Order: most recognised to least recognised)

- A lump / mole
- Change in weight/unexplained
- Weight loss
- Persistent cough
- Change in bowel habits
- Difficulty in swallowing
- Pain
- Bleeding
- Tiredness/fatigue
- Unhealed sore



Respondents recalled the following as causes of cancer

(Order: most recognised to least recognised)

- Smoking
- Eating processed foods/ not enough fruit and vegetables
- Age
- Being overweight
- Alcohol
- Infection with genital warts



Respondents provided their preferred method of engagement/how to access information

(Order: most preferred to least preferred):

- Social Media
- Posters at GP or pharmacy
- Face to face
- Public transport
- Council newsletter/website
- Through the door
- Community centres
- Magazines
- Radio
- YouTube



Our aims over the next five years



NEXT
5
YEARS

Prevention

- Develop a **new universal smoking cessation** offer for inpatients. 
- Work to **minimise the impact of alcohol** on the most vulnerable in our communities. 
- Develop and embed a standardised **Making Every Contact Count (MECC)** approach across the system.
- Develop a **new in-house support offer for expectant mothers**, and their partners. 
- Enhance the **weight management service provision** to support more people.

Population awareness

- Develop and deliver activities that **drive timely presentation to the health system** when people have worrying symptoms. 
- **Improve awareness of cancer signs** and symptoms across NCL. 
- **Reduce inequalities in awareness** of cancer signs and symptoms between different population groups.
- **Embed cancer awareness** raising as part of our work and future strategies that get developed. 

Screening

- **Increase participation in the bowel, breast and cervical screening programmes** towards the national targets and closer to the national average.
- **Reduce inequalities in uptake of screening** across NCL particularly amongst groups that have lower participation rates..
- **Adapt screening improvement activities** in line with national and regional work to meet local needs.
- **Fully roll out the Targeted Lung Health Checks** programme and increase participation to achieve the national target.
- Support the creation of greater alignment between **identification of people with an increased risk of cancer** and surveillance services, and relevant screening programmes.

Our objectives

The objectives focus mostly on population awareness and screening.

Objectives relating to prevention cut across multiple areas and are captured in other ICS plans. Working to address health inequalities is an important thread that runs through the objectives identified.



- 1 **Engage PCNs with low screening uptake** to improve patient participation
- 2 **Augment national and regional campaigns** and utilise community engagement and social media platforms
- 3 **Incorporate cancer awareness education** in the prevention programme
- 4 **Improve screening participation** for people experiencing homelessness
- 5 **Improve screening awareness** for people with severe mental illness and for mental health teams
- 6 **Include cancer screening as part of annual health checks** for people with a learning disability
- 7 **Support bowel screening age extension** to ensure good uptake in younger age cohort
- 8 **Support integration of Lynch Syndrome pathway** into the bowel screening programme

- 9 **Support introduction of risk stratification** within the bowel screening programme
- 10 **Support lowering of the bowel screening test threshold** to identify more early-stage cancers
- 11 **Support implementation of a reminder system** to improve uptake of breast screening
- 12 **Develop a network of champions** to target population cohorts with lower breast screening uptake
- 13 **Create a paper light breast screening pathway** through regional collaboration
- 14 **Support adoption and roll-out of HPV self-sampling** within the cervical screening programme
- 15 **Increase uptake of the HPV vaccine** amongst school-aged children
- 16 **Support implementation of extension of screening recall** frequency for cervical screening
- 17 **Expand delivery of the Targeted Lung Health Checks** programme to invite everyone that is eligible to participate.
- 18 **Support over 50% of the invited population** to attend a lung health check
- 19 **Increase uptake of lung health checks** amongst people living in deprived areas and other populations not taking up their invites

addressing health inequalities runs through all our objectives identified

To view the full version of the
**NCL Cancer Prevention,
Awareness and Screening strategy
and action plan**
visit
www.nclcanceralliance.nhs.uk

