

Questions and Answers

Clinical Questions

How will you manage the current capacity in the system for Radiologists, CT Nurses and ability to read Low Dose CT Scans?

A pathway has been produced which has increased the capacity to read and report on CT scans. Low dose CT Scans will be offered on specially designed screening lorries, which will house respiratory nurses and scanning teams. Reporting will be done by sharing data via existing hospital systems.

We are working closely with the Hospital Trusts involved to ensure the modelling for the programme is sustainable.

Can we build extra capacity into existing pathways for cancer screening?

There is a possibility with the mobile screening trucks that they could be used during 'down time' for other screening purposes. Until we have begun screening and know how much free time might be available we cannot confirm extra capacity.

What extra resources and training are needed to successfully deliver the project?

NHS England is providing training for radiologists in reading the low dose CT Scans. Support will also be given to nurses in performing spirometry and doing lung health checks. Nurses are being recruited from an existing provider of respiratory services. There is also the option to train up nurses working in primary care settings. This will offer an extension to services currently offered at GP practices.

How do we support patients who are not identified as having nodes or cancers but may have other conditions?

If there are other lung conditions identified, patients will be referred back to the GP for onward referral to either the practice respiratory nurse specialist or to the community respiratory teams. For other conditions, they will be referred into the appropriate pathway.

What about the data considerations, how easy will it be to share data with other clinicians? Are there any Information Governance (IG) issues?

We are working with the IG teams and Digital to ensure there are systems in place that can easily communicate with each other and offer the results on a shareable platform. Information Governance of utmost importance.

As a GP what resources do you have for me to explain this process to my patients who are referred?

NHS England is providing a patient leaflet, which will be sent with the invitation letter for screening. We will be providing you with a local pathway so that you can explain to the patient how the process will work. We will also offer a public FAQs document and a short briefing for you and your staff. There is also a website you can refer patients too, with FAQs. www.lutonandthurrocklunghealthcheck.nhs.net

How will you report back to our practice about patients who have been through the screening programme?

The radiologists will send you and your patient the report from the findings and any suggested referrals to be made.

How will patients be invited? Are GPs expected to send the letters out?

No, we have organised external support from a recognised NHS provider, to minimise pressure on your practice. They would request the list of registered smokers / ex-smokers aged 55-74+364 days and a copy of your headed paper and send the letter centrally. If you would prefer to send the letter directly from your practice, you can request financial compensation for this.

What about other cancers, if they are detected?

Patients will go straight into a cancer pathway directly through the hospital trusts.

Public Questions

How long will this screening programme go on for?

This programme will run until March 2023 across 14 areas in the UK. NHS England will examine the evidence and outcomes from the screening programme and then use this to determine how effective this will be if it is rolled out nationally.

How have you decided on where the screening should happen?

We haven't finalised the venues for the screening trucks yet, as this will be determined by availability of space. But we will ensure they will be central to where people live and accessible for parking and transport.

I've received this letter about lung health screening, does this mean I'm at risk of cancer?

It means you are identified as the patient cohort and because of your age and smoking history. The screening process will determine if you are at a higher risk of cancer or other conditions. If you are in a higher risk category you will be offered a low dose scan. The scan may find nothing at all. Or if they do find signs of cancer, the chances are if it's caught early (Stage 1 or 2) this can be treated.

What if I don't want to go?

That's your choice, but we urge you take up the opportunity. Read the leaflet that came with your letter, it will tell you all about the screening process and potential risks. You shouldn't be worried about going, this is a great way to check that you are well and to help you make choices that will improve your health and wellbeing for years to come. If you feel worried you can bring a friend or relative with you for support.

What happens at a lung health check? Lung health check results

You will meet a nurse at your appointment. Your lung health check will take approximately 30 minutes. There are three possible results from your lung health check:

No problems found.

The nurse may find nothing to look into further. We will write to your GP so they know about the appointment.

Referral to your GP

If problems with your breathing or lungs are found, the nurse may refer you on to your GP. We will write to your GP so they know about the appointment.

Offered a lung cancer screening scan?

Whether or not you are offered a lung cancer screening scan will depend on your chance of getting lung cancer now or in the future. We work out your risk from your lifestyle, medical and family history. The nurse will help you to choose whether the test is right for you. We will write to your GP so they know about the appointment.

The nurse will ask you some questions about your breathing and your overall lung health. They will ask you about your lifestyle, family and medical history. They may look at how well you are breathing to find out whether there are any problems with your lungs. This is a simple test for which you blow into a hand-held machine called a spirometer. The machine measures how much air you breathe in and out.

The nurse may talk to you about having a lung scan. This checks for early signs of lung cancer and is called lung cancer screening. They will ask you if we can keep your information on file to help us improve the lung health check programme.

You will have plenty of time to chat to the nurse and ask any questions.

You can bring a friend, family member or partner with you on the day if you want to.

If there are no significant findings

If after the scan there are no significant findings in your lungs, you will be invited back to a further screening two years later. (By March 2023) This is to make sure that nothing has changed.

What is lung cancer screening?

Lung cancer screening uses a low-dose CT scan to check for the early signs of lung cancer, before you have any symptoms. This is a special scan that uses a very low dose of radiation and a computer to take a detailed picture of your lungs.

Why are you only targeting smokers or ex-smokers, what about people living in polluted areas?

This criteria was set by NHS England, smokers are statistically more at risk from developing lung diseases and / or cancers. This patient cohort has been selected so that the evidence can be gathered around identifying smokers / ex-smokers early on, who may be at risk of lung disease. These criteria may change after the initial programme.

Will this screening have any impact on other scans, will it mean I have to wait longer for other scans?

No, it shouldn't do as this is a separate resource and programme of work to every day screening, scanning and respiratory (lung) services. However if you are already being treated for other cancers you may not be eligible for this programme.

What if I don't fit in the criteria but I'm worried about my lung health?

If you feel unwell and have a persistent cough that has lasted more than 3 weeks, you should contact your GP for advice. They may still decide to refer you for further investigation at your local hospital or respiratory clinic. Visit the British Lung Foundation for advice on other lung health problems. www.blf.org.uk

I've heard about this screening in Thurrock/Luton, why aren't people in Essex/Bedfordshire as a whole invited to this?

These areas have been selected by NHS England, because they have a similar population with evidence of high smoking rates and late presentations for lung cancer. The outcomes for people with lung cancer presenting later on in the stages is very poor. These areas have been selected as they need the most intervention and the screening can provide the biggest impact.

Once the four year programme is over and the evidence of impact is gathered it may be decided to extend the programme to a wider area. But we can't say for certain this will happen.

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