

WIMBLEDON COMMUNITY FORUM  
22 SEPTEMBER 2021

(7.15 pm - 8.30 pm)

PRESENT Councillors Councillor James Holmes (in the Chair),

## 1 WELCOME AND INTRODUCTIONS (Agenda Item 1)

The meeting was held via Zoom, and chaired by Councillor James Holmes. Five residents and six councillors attended on Zoom with 58 additional views on YouTube. The Chair welcomed everyone to the meeting and explained how the meeting would work.

## 2 MERTON COUNCIL UPDATE (Agenda Item 2)

Cllr Eleanor Stringer, Joint Deputy Leader and Cabinet Member for Children and Education, provided an update on behalf of the Leader of the Council, Cllr Mark Allison. Eleanor Became Deputy in November 2020 but has been attending Forum as a local Cllr for Abbey ward since 2018.

Merton has a great community but still has many challenges. Eleanor said she is passionate about lifting the life changes of disadvantaged residents through measures like improving schools, maintaining Council Tax support and progress on other services like libraries, new a leisure centre in Morden. However, the pandemic has made inequalities worse and emphasised existing issues like the need to address housing shortage.

Merton now has the most diverse cabinet in our history, and in response to the pandemic we launched Merton Together to help bring together communities. Eleanor thanked everyone who got involved in supporting the community including those working with the Foodbank and the Dons Local Action Group.

The Council has been working with NHS colleagues to keep people safe but there has seen been a huge impact on many people's lives. This has included people spending time at home in Merton rather than commuting so we wanted to listen to residents of experience of the pandemic, so we launched the Your Merton engagement exercise. We are still analysing the results but it is clear that residents in particular value parks and open spaces, and the sense of community. The Leader and Cabinet are still in listening mode which is why we have listened to concerns about the emissions based parking charges which were about to be introduced. The

context has changed since the initial proposals so we will not be going ahead with them.

A resident had asked about the latest information on the removal of trees by Trust Ford. Cllr Stringer said an update would be provided. Following the meeting officers confirmed that Merton Council is still exploring possible legal options and will announce any actions we take at an appropriate time.

Cllr McGrath asked if the PTAL Parking changes will also be reversed and if the Emissions proposals are now on hold how long will this be for. Cllr Stringer said the changes already made will stay, but nothing new will be coming through. Emissions charges plan will be halted.

A resident asked if Merton will build Council Housing. Cllr Stringer explained that Merton does not own any housing, but we are keen to build more social housing. We will be looking to deliver more as part of estates regeneration at Eastfields, High Path and Ravensbury

A resident said that the equipment in Dundonald Rec needs updated Cllr Stringer said she would be happy to look into what could be done.

Cllr Gretton asked about proposed changes to the contract with Clarion Housing. Cllr Stringer said there are ongoing issue with Clarion and getting repairs done but those estates need to be re-built and the Council is pleased to support the regeneration.

A resident asked why Merton Council's property company failed. Cllr Stringer said the company was trying to build more homes but the approach was not going to deliver as we wanted.

### 3 LOCAL CANCER SERVICES (Agenda Item 3)

Dr Navdeep Alg, South West London Clinical Commissioning Group cancer lead gave a presentation on cancer services in the area. The presentation can be found attached to this report. The pandemic has delayed care and diagnosis in some cancers and there is a need to catch up. This is particularly the case for breast, lung, and urological cancers, mainly due to less screening taking place during the pandemic.

South West London CCG is trying to raise awareness through social media, local press, TV, and non-digital advertising. They are working with an organisation called Community Links to target particular communities and offer information in community languages.

The CCG is also attending public engagement events to have face-to-face contacts. This includes a Cancer Awareness Day at Vestry Hall on 6 November. Dr Alg is happy to attend any community events and asked if anyone has any ideas for events he could attend to email [Steven.Nzekwue@swlondon.nhs.uk](mailto:Steven.Nzekwue@swlondon.nhs.uk). Dr Alg also asked attendees to help share the message that services are open and we want to see patients who have symptoms.

A resident asked how long it will take to catch up. Dr Alg said in some areas, cervical and urological cancers, they have nearly caught up already but for others, breast and lung cancer for example, this may take six months or even longer.

#### 4 PUBLIC HEALTH UPDATE (Agenda Item 4)

This update will be provided at the next meeting.

#### 5 OPEN FORUM (Agenda Item 5)

A resident asked about the condition of the playground in Dundonald Rec the bin situation. There have been some improvements but there are two bins near the playground are still regularly overflowing and need clearing. Cllr Stringer said more people are using parks and the key message is that if bins are full take your rubbish home.

#### **Health services:**

Sandra Ash from Keep Our St Helier Hospital (KOSHH) said as a result of the Health and Social Care Bill residents need to be aware of implications of new contracting arrangements for hospital services through Integrated Care System boards. The ICS will take over from CCG. The decision has been taken to downgrade St Helier and replace emergency services with smaller facilities on the Sutton Hospital site. There have been significant changes to the plans which means there should now be additional consultation. Changes include the original £511m grant award was now insufficient for the plans; there is a need for additional beds; the need to sell additional land; the need for additional car park spaces; a higher building at Sutton; a change to renal facilities moving to Royal Marsden; and increased sharing of services with Royal Marsden. The CEO of Epsom and St Helier has left and their roll merged with St Georges CEO the same will happen with the Chair of the Trust. The Department of Health has asked Trusts to submit plans for new build costing up to £400m. Sandra asked councillors and residents to support re-opening consultation and to keep services at Epsom and St Helier.

Cllr Stringer said Merton Council has raised concerns about the renal care changes and is using their powers to challenge this. Cllr Williams responded that changes to St Helier are less relevant to Wimbledon area than other parts of the borough. St Helier is not an ideal place to centre critical care services and the building is poor

condition. Cllr Gretton said the new facilities would hugely benefit Wimbledon residents and welcome the investment into local services. Dr Alg said works at St Helier and agreed it is not a great site for critical care and was excited by the idea of the new acute care facilities in Sutton.

6 DATE OF NEXT MEETING (Agenda Item 6)

Councillor James thanked everyone for attending and closed the meeting.

The date of next meeting is 7.15pm Wednesday 1 December, venue to be confirmed.

# Cancer care update

Page 91

Dr Navdeep Alg

CCG cancer lead (Merton)

Macmillan GP (Merton)

GP, The Grand Drive Surgery



Minute Item 3

# Outline

---

- South West London Cancer catch up-  
Pandemic
- Urological Cancers
- Lung Cancers
- Merton community events
- Primary Care Networks



# South West London- Covid Cancer catch up

## 31 day 1st Treatments: Q1-Q3 2019/20 vs 2020/21

### SWL

Tumour Type	Q1		Q2		Q3		Q1-Q3		
	2019/20	2020/21	2019/20	2020/21	2019/20	2020/21	2019/20	2020/21	Difference
Urological	458	234	446	330	448	401	1,352	965	-387
Breast	348	187	382	232	383	322	1,113	741	-372
Lung	229	159	224	174	226	178	679	511	-168
Lower Gastrointestinal	187	136	201	187	186	191	574	514	-60
Skin	271	206	268	270	312	317	851	793	-58
Head & Neck	79	56	81	95	95	74	255	225	-30
Haematological	143	126	125	113	143	147	411	386	-25
Sarcoma	43	36	39	34	53	45	135	115	-20
Gynaecological	91	94	89	97	115	93	295	284	-11
Brain/Central Nervous System	25	15	15	42	46	26	86	83	-3
Other	31	27	24	36	34	35	89	98	+9
Upper Gastrointestinal	115	117	136	129	112	131	363	377	+14
Children's	30	42	26	26	21	34	77	102	+25
<b>Total</b>	<b>2,050</b>	<b>1,435</b>	<b>2,056</b>	<b>1,765</b>	<b>2,174</b>	<b>1,994</b>	<b>6,280</b>	<b>5,194</b>	<b>-1,086</b>

Women is major gap

Likely driven by screening

Covid risk

Graph showing numbers of patients treated from Q1 to Q3, comparing 2019/20 to 2020/21

2,400

Please note:



# 'Missing' 1<sup>st</sup> treatments

There are shortfalls in the number of people starting treatment for some tumour types compared to before the pandemic, this represents a clinical risk that people are not having cancer diagnosed and starting treatment.

**31% less people are starting treatment for Breast cancer in M&W:** Potentially explainable by the screening programme backlog, need to remind people to attend screening appointments and to get symptoms checked.

**8% less people starting treatment for Prostate/Bladder cancer in Merton and 22% less in Wandsworth. 6% and 49% less for Lung Merton and Wandsworth respectively:** Potentially driven by people overlooking symptoms for these cancers, an aversion or hesitancy to approach primary care, or confusion with covid symptoms (Lung).

PROSTATE & BLADDER				
	2019-20	20-21	Difference#	Difference%
NHS CROYDON	238	148	90	38%
NHS KINGSTON	115	77	38	33%
NHS MERTON	83	76	7	8%
NHS RICHMOND	92	75	17	18%
NHS SUTTON	118	77	41	35%
NHS WANDSWORTH	93	73	20	22%
<b>Grand Total</b>	<b>739</b>	<b>526</b>	<b>213</b>	<b>29%</b>

BREAST				
	2019-20	20-21	Difference#	Difference%
NHS CROYDON	205	145	69	29%
NHS KINGSTON	91	59	32	35%
NHS MERTON	80	55	25	31%
NHS RICHMOND	98	78	20	20%
NHS SUTTON	120	99	21	18%
NHS WANDSWORTH	127	87	40	31%
<b>Grand Total</b>	<b>721</b>	<b>523</b>	<b>198</b>	<b>27%</b>

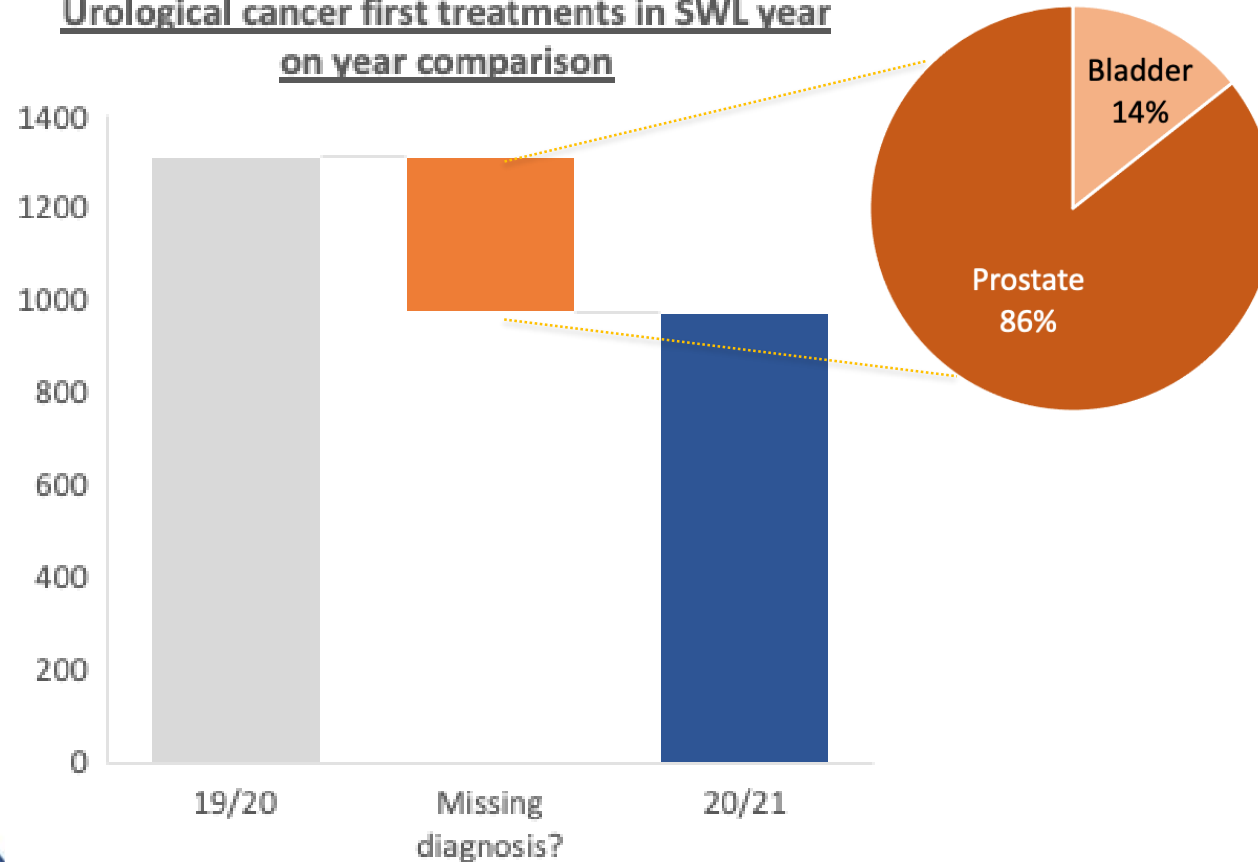
LUNG				
	2019-20	20-21	Difference#	Difference%
NHS CROYDON	99	73	26	26%
NHS KINGSTON	48	30	18	38%
NHS MERTON	52	49	3	6%
NHS RICHMOND	42	40	2	5%
NHS SUTTON	81	72	9	11%
NHS WANDSWORTH	82	42	40	49%
<b>Grand Total</b>	<b>404</b>	<b>306</b>	<b>98</b>	<b>24%</b>





# Urological cancer and the pandemic

Urological cancer first treatments in SWL year  
on year comparison



There were 300+ fewer patients starting treatment for Urological cancers in 20/21 across SWL (compared to the same period the previous year)

## Possible explanations

- Remote triage - Reduction in urine dips
- Women repeated treated for UTI without dip/referral for cystoscopy
- Reduced opportunity for opportunistic PSAs
- Reduction in patients presenting for annual PSA tests on 'watch and wait'



# Lung Cancer catch up

---

- Significant reduction in cancer diagnosis
- Worse in Wandsworth
- Emphasise message
  - Persistent cough
  - Blood in sputum
  - Unexplained weight loss
  - Long term smoker



# SWL - CCG 31 Day Missing 1st Treatments

Fin Year	Quarter/Month	Urological	Breast	Skin	Lower Gastrointestinal	Lung	Haematological	Upper Gastrointestinal	Gynaecological	Head & Neck	Other	Brain/Central Nervous System	Sarcoma	Children's	Grand Total
2019/20	Q1	373	257	236	159	160	108	87	81	59	18	16	8	11	1573
	Q2	355	269	225	150	149	91	98	71	63	16	9	17	4	1517
	Q3	352	271	264	172	149	104	106	92	68	22	24	12	4	1640
	Q4	346	294	212	150	137	104	66	76	68	16	19	10	8	1506
<b>2019/20 Total</b>		<b>1426</b>	<b>1091</b>	<b>937</b>	<b>631</b>	<b>595</b>	<b>407</b>	<b>357</b>	<b>320</b>	<b>258</b>	<b>72</b>	<b>68</b>	<b>47</b>	<b>27</b>	<b>6236</b>
2020/21	Q1	203	127	175	118	112	101	84	72	51	17	9	13	25	1107
	Q2	254	176	237	156	121	99	110	64	72	23	28	8	9	1357
	Q3	325	244	256	161	141	110	92	70	55	22	12	8	12	1508
	Q4	262	219	249	158	133	120	99	88	85	19	23	12	9	1476
<b>2020/21 Total</b>		<b>1044</b>	<b>766</b>	<b>917</b>	<b>593</b>	<b>507</b>	<b>430</b>	<b>385</b>	<b>294</b>	<b>263</b>	<b>81</b>	<b>72</b>	<b>41</b>	<b>55</b>	<b>5448</b>
2021/22	Q1	335	270	279	170	143	110	112	79	74	23	19	16	6	1636
	Jul-21	144	101	86	56	62	41	22	33	27	16	4	7	5	604
<b>2021/22 Total</b>		<b>479</b>	<b>371</b>	<b>365</b>	<b>226</b>	<b>205</b>	<b>151</b>	<b>134</b>	<b>112</b>	<b>101</b>	<b>39</b>	<b>23</b>	<b>23</b>	<b>11</b>	<b>2240</b>
<b>Grand Total</b>		<b>2949</b>	<b>2228</b>	<b>2219</b>	<b>1450</b>	<b>1307</b>	<b>988</b>	<b>876</b>	<b>726</b>	<b>622</b>	<b>192</b>	<b>163</b>	<b>111</b>	<b>93</b>	<b>13924</b>

Page 7 of 11

	Urological	Breast	Skin	Lower Gastrointestinal	Lung	Haematological	Upper Gastrointestinal	Gynaecological	Head & Neck	Other	Brain/Central Nervous System	Sarcoma	Children's	Grand Total
2019/2020 Quarterly Treatment Average	357	273	234	158	149	102	89	80	65	18	17	12	7	1,559
Diff Between 2019/20 & 2020/21 Total Treatment Volumes	-382	-325	-20	-38	-88	23	28	-26	5	9	4	-6	28	-788
Rolling Deficit/Increase	-378	-318	33	-22	-81	38	43	-21	20	24	4	1	30	-627
2019/20 vs 2021/22 Quarterly Activity cf	-10%	5%	18%	7%	-11%	2%	29%	-2%	25%	28%	19%	100%	-45%	4%

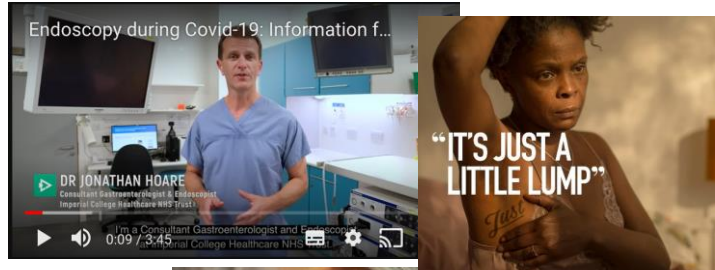
\*Rolling Deficit - (Gap between 2019/20 & 2020/21) + (Diff 19/20 Avg - 21/21 Actuals)

Source: CWT from NHS Digital

# Communications

**Cough, breathlessness not going away? Sore chest? Losing weight and your appetite?**

If you have a new or changed cough for more than a few weeks and you're worried about lung cancer, contact your GP for help.



NHS

JUST SPEAK TO YOUR GP

Clear as cancer help us help you



NHS

JUST SPEAK TO YOUR GP

Clear as cancer help us help you



NHS

JUST CONTACT YOUR GP PRACTICE

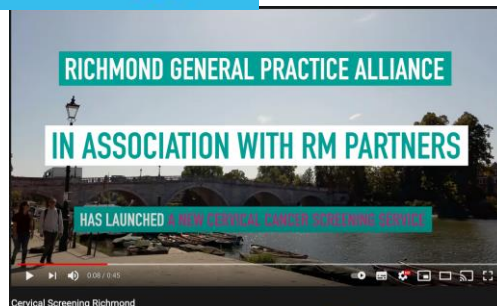
**Worried about cancer?**

Don't delay getting checked, speak to your GP  
Help Us Help You



NHS

**Worried about breast cancer?**



Cervical Screening Richmond

We have run **patient and public communications and social media campaigns** during Covid to **restore public confidence and encourage people** to continue to access Cancer Services with cancer symptoms to visit their GP.

In Dec 20-Jan 21, we ran cancer symptom awareness and breast awareness campaigns on radio, social media and “out of home” platforms. In May-June 21, further targeted campaigns have run on breast, lung, skin, prostate cancer and general cancer symptoms.

We are now broadening our approach to engaging with patients and the public within our local communities and working with community and voluntary sector leaders to further embed cancer awareness messages to support recovery.



# Actions to support

---

- Cancer Screening Services- have onboarded a service called 'Community Links' which provides multilingual support for patients who's first language is not English
- In addition to the general cancer communications, specific interventions are being developed to help tackle the inequalities that have been compounded by Covid. These include targeting 'rising' 60's, learning disabled, LGBTQ and extended access across the SWL Boroughs to support increase Cancer Screening uptake



# Actions to support

## Lung

### PUBLIC FACING

“Do it for yourself” public facing campaign – working with MSD pharmaceuticals to roll out on bill board, pharmacy bags etc in most deprived areas of SWL

### PRIMARY CARE FACING

Case finding project in Wandsworth – asking Practices of greatest deprivation to complete search of patients with recurrent lower respiratory tract infections. Practices are incentivised to undertake search, contact patient, request chest x-ray and have clinical review. Results expected early November to measure impact.



Help Us to help You  
social media campaign  
locally linking in with  
national campaign



# Actions to support. contd

---

## Prostate & Bladder

- Comms sent out to primary care teams on restarting PSA monitoring for patient at high risk of prostate cancer, and the importance of performing urine dip to check for blood where appropriate (linking with NWL RMP case finding work), including how to minimise impact from recent blood bottle shortage.
- Links in with public facing engagement work (as below)

## Breast

- RMP have worked with the breast screening Hub and South West London Breast Screening Service (SWLBSS) to commission a multi-lingual service to call those patients who have not responded to their Open Invitation.
- SWL ICS and RMP are working closely with NHS England cancer screening commissioners and the SWLBSS service to ensure sufficient capacity to recover the service by July 2022. A further recovery action plan is being agreed.



# Local community engagement messages

Event	Borough	Public	Location	Team		Date	Time	Requirement
		Audience		Owner	Point of contact			
African Caribbean Family Fun Day	Sutton	Public	Hill House Community Centre		Claire Coutts	31-Jul-21		In person stand
Patient participation group (PPG)	Richmond	Public	Online	ML	Rachel Swan	03-Aug-21	11:35	Short presentation
Patient and Public Involvement Reference Group	Wandsworth & Merton	Public	Online		Claire Coutts	04-Aug-21		Short presentation
Asian themed family day	Sutton	Public	Hill House Community Centre		Claire Coutts	08-Aug-21		In person stand
PCN health and wellbeing funday	Merton	Public	Pollards Hill	DW	Navdepp Alg	28-Aug-21	All day	In person stand
Whitton Fair	Kingston	Public	Whitton, Kingston		Rachel Swan	30-Aug-21		Provided materials to Rachael to leave on
Communications & Engagement meeting	Kingston & Richmond	N	Online		Rachel Swan	07-Sep-21	10:00-11:30	
Patient and public forum	Kingston	Public	Online		Rachel Swan	08-Sep-21	11:00-12:00	
Community involvement event	Richmond		Online		Rachel Swan	14-Sep-21		
Croydon BME Wellbeing Centre Prostate Event	Croydon	Public	Online - future in person events at Whitgift shopping centre		Andrew Brown	20-Oct-21		Need to contact <a href="mailto:andrew@bmeforum.org">andrew@bmeforum.org</a> to discuss details. John
Residents association meetings	Wandsworth & Merton	Public	Merton Park Colliers Wood Raynes Park West Barnes		Claire Coutts		Various	
North Merton PCN PCN event	Merton	Public			Satnam Bains	06-Nov-21	14:00-18:00	
WCEN women from black and ethnic minority community event	Wandsworth	Public	Mushkil Aasaan		Anissa Daud	Sept and Jan (2 events)		Looking for femal HCP from South Asian (Sep) and Somali (Jan) background to talk about Breast cancer





# Engagement Strategy

Discuss cancer priorities with patient groups, partner organisations or community teams

Identify specific public events or networks that overlap with the cancer priorities

Take cancer warning signs and risk factors to specific public audiences



# North Merton Cancer awareness day

---

- 6<sup>th</sup> November



# Key Drivers on Missing 1st Treatments for all Tumour Groups

---

- PCN/Practice visits by Place (borough) cancer leads – excellent uptake of these
- RedWhale Primary Care education events recently commissioned and ensuring missing first treatment targeting is included in the training package (starts Nov 2021 tbc)
- Provision and roll out of non-site specific RDCs across SWL – St Georges Trust now accepting referrals to all SWL boroughs, Epsom and St Helier site also just opened, Kingston and Croydon in development, Wandsworth also have coverage from C&W ADOC. SWL webinar to Primary Care (planned October 2021) along with further comms to Primary Care teams highlighting the benefit of these clinics, so able to act on investigating vague symptoms suggestive of cancer, and highlight missing first treatment work.
- Promoting Business As Usual activity – covid effect, and more recently impact of blood bottle shortage. Linking with NHSE guidance, discussed with Place cancer clinical leads and SWL/RMP cancer team, comms to Practices on importance of continuing blood testing where suspicion of cancer, which may facilitate diagnosis. Development of local toolkit on how virtual consults can be utilised to improve cancer diagnosis, and round table event being organised to determine best practice (primary, secondary care and patient representation)
- Linking into other pathway groups, and CCG partners – such as recent presentations to Wandsworth Health and Care Board and Richmond Health Board. Promoting collaborative across pathways; to pick up cancers when not referred via a 2WR pathway.



# Primary Care Networks

---

- Primary care networks (PCNs) form a key building block to the [NHS long-term plan](#)
- 30–50,000 patients- Groups of GP practices
- Deliver key strategies for NHSE



# PCN- Early Cancer PCN DES

---

- NHS Long term Plan- 2028 75% of cancer diagnosis at stage 1 or 2 (currently 50%)
  - Increased 5 year survival, quality of life and treatment options
- Cross organisational work
  - RM Partners Cancer Alliance, SWL CCG, Macmillan, PCN, GP Federation



# Cancer DES Requirements

---

1. Review referral practice for suspected cancers, including recurrent cancers.
2. Contribute to improving local uptake of National Cancer Screening Programmes.
3. Establish a community of practice between practice-level clinical staff to support delivery of the requirements of the Network Contract DES Specification.



# Questions

---



This page is intentionally left blank