GIG CYMRU NHS WALES | Addysg a Gwella Iechyd Cymru (AaGIC) Health Education and Improvement Wales (HEIW)

Mouth Cancer Quality Improvement Tool

Introduction

This tool has been developed by HEIW to help primary care dental teams to consider factors relevant to mouth cancer and the needs of their patients. It is designed to be used by the whole practice team - all members of the dental team, clinical and non-clinical, may have a role in providing care and advice to patients.

Background

More than 60% of mouth cancer patients in Wales are diagnosed at stage 3 or 4. Early-stage diagnosis is associated with improved survival rate, and cancers detected when they are smaller than 2cm in diameter are associated with better prognosis.

AIM

The main aim of the Mouth Cancer QI Tool is to support dental teams to improve their contribution towards early diagnosis of mouth cancer.

OBJECTIVES

Use of the Mouth Cancer QI tool and reflection on findings should lead to:

- Identification of need for training on mouth cancer including how to discuss urgent suspected cancer with patients. The tool includes information on resources and training available for practices.
- All team members being updated on the main risk factors and protective factors for mouth cancer.
- Improved assessment and record keeping on soft tissue examination and discussion of risk factors.
- Raised patient awareness about risk and protective factors for mouth cancer including the most common early signs of mouth cancer and the need to attend for oral assessment.
- Provision of targeted prevention for those identified at high risk of developing mouth cancer including delivery of brief intervention and referral to appropriate services (e.g. smoking cessation services)
- Reflection and learning from feedback when patients are referred for specialist opinion / treatment of soft tissue abnormalities and urgent suspected cancers (e.g. Case based discussion with colleagues, peer review of oral medicine patients etc)
- Self-assurance that the dental team does all it can to reduce risk of mouth cancer for their ‘practice population’ and reduce the risk of late diagnosis.
- Practice exploring opportunities to establish referral pathways between the dental practice and other local primary and social care teams (e.g. to accept referral of patients from GMS, pharmacy, social care teams for dental assessment and vice versa)

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This tool has 5 Sections:

1. Identifying Patient Risk Factors – Clinical Assessment
2. Discussing Risk, Providing Advice, and Information
3. Patients with Malignant or Potentially Malignant Conditions
4. Health Promotion and Public Health
5. Training and education

For the majority of sections respondents are expected to identify the level of confidence within the team for addressing each point:

Green Confident	Amber Somewhat Confident	Red Not at all Confident

Further columns ask the team to identify what they can do to make improvements, and what training and resources are available to provide support:

What can we do?	Training and resources to support the team
Use this column to describe actions to raise standards in the practice to meet the green level.	**This provides links to specific resources and information to support the team.**

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1. Identifying Patient Risk Factors and Clinical Assessments

	Confident	Somewhat Confident	Not at all Confident	What can we do?	Training and resources to support the team
The medical, social and drug history identifies risk factors: • Smoking and tobacco products • Chewing betel nut (or similar) • Alcohol • Exposure to sunlight (may be occupationally related) • HPV Vaccine for relevant age group					**Gateway C - Head and Neck Cancer Resource** Canser y Pen a'r Gwddf / Head and Neck Cancer - GatewayC **BDA CPD Hub - BDA-CRUK Oral Cancer Recognition Toolkit** Learning and development at the BDA **HEIW CPD Online Module** Mouth cancer | CPD for General Practitioners (heiw.wales) **A Tobacco Control Strategy for Wales** A smoke-free Wales: Our long-term tobacco control strategy [HTML] | GOV.WALES
Intra and extra oral examination includes all soft tissues/head and neck.					

	Confident	Somewhat Confident	Not at all Confident	What can we do?	Training and resources to support the team
Findings are comprehensively recorded in patient record i.e., Record if abnormality detected or not.					
Clinical photographs taken if required.					

2. Discussing Risks and Providing Advice and Information

	Confident	Somewhat Confident	Not at all Confident	What can we do?	Training and resources to support the team
For patients with identified risk factors:					**HEIW Integrating Smoking Cessation Audit** Integrating smoking cessation - HEIW (nhs.wales) **Help Me Quit** https://www.helpmequit.wales/ **National Centre for Smoking Cessation and Training** http://elearning.ncsct.co.uk/vba_wales-launch **NCSCT e-Learning - Stop Smoking Practitioner Training and Assessment Wales** NCSCT e-learning **NHS e-Learning (MECC - Making Every Contact Count)** MECC // Public Health Network :: E-Learning **Public Health Network** https://mecc.publichealthnetwork.cymru/en/resources/lifestyle-info/smoking/
• Team members discuss the risks and provide advice and guidance					
• All smokers who are interested in quitting are referred to "Help Me Quit" using the on-line referral system					

	Confident	Somewhat Confident	Not at all Confident	What can we do?	Training and resources to support the team
• Patients are recalled at appropriate intervals					**NICE Recall Guidance** **https://www.nice.org.uk/guidance/cg19/chapter/Introduction** **NICE Guidance - Behaviour Change: Individual Approaches** **Overview | Behaviour change: individual approaches | Guidance | NICE** **NHS Wales - Alcohol advice** **Alcohol advice - NHS (www.nhs.uk)** **'Have a Word' Alcohol Campaign and Training** **Alcohol Identification and Brief Advice - elearning for healthcare (e-lfh.org.uk)**
• For patients with abnormalities that require monitoring in the practice, systems are in place to assess the patient regularly and ensure non-attendance is followed up					

3. Patients with Malignant or Potentially Malignant Disorders

Practice teams are expected to provide routine care throughout their treatment

	Confident	Somewhat Confident	Not at all Confident	What can we do?	Training and resources to support the team
All patients are referred using e-referral system					**E-Referral System Route** https://www.dental-referrals.nhs.wales/dentists/cancer/
Systems are in place in the practice to:					**British Society of Special Care Dentistry** BSSCD
a) track referral to ensure patients are seen within two weeks					**NICE Cancer Referral Guidelines** Overview | Suspected cancer: recognition and referral | Guidance | NICE
b) ensure ongoing management of patients includes recall in the practice at appropriate intervals					**BISOM British and Irish Society of Oral Medicine - Guidance for Patients** Oral-Cancer-PIL.pdf (bisom.org.uk)
c) identify non-attendance at the practice which is noted and followed up					

	Confident	Somewhat Confident	Not at all Confident	What can we do?	Training and resources to support the team
d) ensure communications/ recommendations from secondary care are incorporated into patient's care and notes					
e) The clinical team reflect on all aspects of care for patients who are confirmed as having mouth cancer – including initial assessment, advice, referral, aftercare in practice, feedback from secondary care services.					

4. Health Promotion and Public Health

	Confident	Somewhat Confident	Not at all Confident	What can we do?	Training and resources to support the team
The Practice team engages with Mouth Cancer Action Month					**Mouth Cancer Action Month** https://www.dentalhealth.org/Pages/Category/mouth-cancer-action-month **Welsh Government Guidance on HPV Vaccinations** Older children and young adult vaccinations | GOV.WALES **Public Health Wales HPV Vaccinations** HPV vaccine - Public Health Wales (nhs.wales) HPV vaccine - Information for health professionals - Public Health Wales (nhs.wales) **Cancer Research UK - Mouth and Oropharyngeal Cancer** Mouth cancer | Cancer Research UK **Macmillan Cancer Support** Mouth cancer | Macmillan Cancer Support **Changing Faces Charity** https://www.changingfaces.org.uk/ **Mouth Cancer Foundation** https://www.mouthcancerfoundation.org/
The Practice team promotes uptake of HPV vaccination by target groups					
The Practice team will liaise with Health board groups and LDC to improve local networks and pathways (oral medicine/oral cancer.)					

					BDJ article Mouth Cancer: Presentation, Detection, and Referral in Primary Dental Care **https://www.nature.com/articles/sj.bdj.2018.931**

5. Training and Education for all Team Members

All team members have had up-to-date mouth cancer awareness training during the last 24 months:	**TRAINED AND CAN EVIDENCE (INTIALS)**	**NEED TRAINING (INITIALS)**	**Training and resources to support the team**
Dentists			**Enhanced CPD Scheme** https://www.gdc-uk.org/professionals/cpd/enhanced-cpd
Dental hygienist & therapists			
Dental Nurses			
Non-clinical staff			

	Confident	Somewhat Confident	Not at all Confident	What can we do?	Training and resources to support the team
Dentists and other clinical team members feel able to detect and record abnormalities (which may be mouth cancer)					**HEIW CPD Online Module** **Mouth cancer | CPD for General Practitioners (heiw.wales)** **Gateway C - Head and Neck Cancer Resource** **Canser y Pen a'r Gwddf / Head and Neck Cancer - GatewayC** **BDA CPD Hub - BDA-CRUK Oral Cancer Recognition Toolkit** **Learning and development at the BDA**
	Confident	Somewhat Confident	Not at all Confident	What can we do?	Training and resources to support the team
Team members feel able to discuss these abnormalities with patients, carers, and relatives					**Dental e-Referral System** **https://www.dental-referrals.nhs.wales/dentists/**
Dentists and other clinical team members feel able to discuss pathway and potential outcomes with patients who are					**Oral Medicine Referral** **Oral Medicine | Dental Wales (nhs.wales)**

being referred as urgent suspected cancer (USC).					