



Eich cyf/Your ref P-06-1294
Ein cyf/Our ref EM/04146/22

Jack Sargeant MS
Chair - Petitions Committee
Senedd Cymru
Cardiff
CF99 1SN

06 January 2023

Dear Jack,

Thank you for your letter of 25 November regarding the petition (P-06-1294) for improved metastatic breast cancer care.

I was pleased to contribute to the debate on 19 October and I would like to reiterate my thanks to you as Chair of the Petitions Committee and to the petitioner for raising this important matter.

I can confirm that the Wales Cancer Network has begun work on a set of nationally agreed metastatic cancer pathways, starting with metastatic breast cancer. These will be developed by the Network's expert group for breast cancer and then proceed through a process of approvals prior to publication. I cannot give a timeframe for this work as it will depend upon the ease with which clinical consensus can be reached on the content of the pathway and if there are any significant service implications that will have to be considered prior to adoption.

The recommendations of the Wales Cancer Network regarding metastatic breast cancer were due to be considered by the Network Board in November but unfortunately this was subsequently deferred to its January meeting. I can confirm it does include a recommendation for the development of a metastatic breast cancer pathway.

The Welsh Government has invested around £11 million, including both capital and revenue funding, to replace the functionality of the Cancer Network Information System Cymru (CaNISC). This funding is for the purpose of introducing the Welsh Patient Administration System to Velindre Cancer Centre, replacing the clinical record provided by CaNISC, and providing for enhanced data functionality – such as providing data for service planning and development. The funding is for the purpose of developing and running the new system, rather than for interrogating its data outputs. The Wales Cancer Network has several information specialists that support use of cancer data, but these are not data analyst professionals.

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

In terms of supporting GP awareness of the symptoms of metastatic breast cancer, we expect GPs to apply the symptomatic referral guide from the National Institute for Health and Clinical Excellence. We also expect GPs to be aware of a person's medical history and the Wales Cancer Network is working on the development of standardised, electronic treatment summaries that would be issued on discharge from cancer services and include symptoms of recurrence. The Welsh Clinical Portal and Welsh Clinical Communications Gateway allow GPs to communicate with hospital consultants regarding the need for referral. In addition, the Wales Cancer Network is piloting the use of a digital programme called 'C the Signs' to support GPs to make referral decisions for suspected cancer.

It is for health boards to apply their available workforce to meet the population's needs. We expect that to be done in accordance with national standards. The National Institute for Health and Care Excellence does not specify that the key worker should be a secondary breast cancer nurse specialist. I expect women with secondary breast cancer to be supported by cancer nurse specialists, but I welcome the development of more specialist roles throughout Wales where this is appropriate and sustainable.

I hope this information is helpful.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'M. E. Morgan'.

Eluned Morgan AS/MS

Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol
Minister for Health and Social Services