# Commissioning to improve cancer survival: putting evidence into practice

Paul Iggulden[a], Sarah Seager[a], Judith Shankleman[b], Andy McMeeking[b], Teresa Moss[b], Sue Atkinson[a]

a. PHAST
b. Transforming Cancer Services Team for London

Email: pauli@phonecoop.coop

## 1. Background

Cancer is responsible for the majority of avoidable deaths in England and Wales[1]. As such it is unsurprising that cancer indicators feature prominently in the national set of outcome indicators for Clinical Commissioning Groups (CCGs)[2].

The index of one-year survival from all cancers combined provides a convenient, single number that summarises the overall patterns of survival for cancers newly diagnosed each calendar year, for a wide range of cancers with very disparate survival.

Cancer survival is highly topical with international comparisons being widely reported.

*"Because UK cancer survival rates are lagging so far behind the rest of Europe, people are dying needlessly. Frankly, this is shameful. If countries like Sweden, France, Finland and Austria can achieve these rates, then the UK can and should, bridge the gap."*[3]

## 2. What we were asked to do

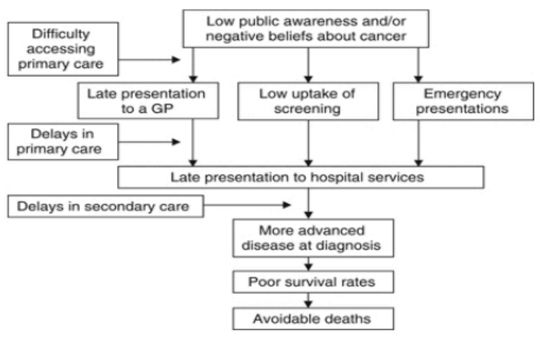
The Transforming Cancer Services Team (TCST) for London commissioned PHAST to report on, for each of the 33 London and West Essex CCGs, an in-depth analysis of current positions and trends in one-year cancer survival.

## 3. Our approach to the work

The one-year net all cancers survival index produced by LSHTM and published by ONS[4] was the focus of the analysis.

In conjunction with colleagues in the TCST London a range of explanatory factors was identified. These covered the National Awareness and Early Diagnosis Initiative (NAEDI) pathway and are grouped into three themes: public awareness, early diagnosis and treatment.

The NAEDI pathway




The reports for each CCG use routinely available data sources such as the National Cancer Intelligence Network (NCIN) GP practice profiles. London data is provided as a comparator alongside trend data for the CCG; where London figures were not available we have used published national data.

The data periods used in the report were selected on the basis of a combination of timeliness and relevance to the periods covered by the net survival index (1997 – 2012 for the one-year survival index and 2008 – 2012 for the site specific indices).


## 4. Key outputs

Tailored reports were produced for each of the 33 London and West Essex CCGs.

The work undertaken was based on the index of cancer survival for Clinical Commissioning Groups in England: Adults diagnosed 1997-2012 and followed up to 2013, published in December 2014.

We produced CCG specific reports for CCGs to be able to develop plans to improve their population survival rates. The reports support CCGs meeting the request by NHE England (London) as part of the Key Lines of Enquiry (KLoE) for CCG narratives for 2015/16 operational plans to explain how they will track one-year net cancer survival rates and to detail their plans for improving this key measure.

The reports were in two parts.

*Part I*

The one-year net survival index – here we provided an overview of the index and report on current positions and trends across the 33 London and West Essex CCGs:

- Background to the one-year net survival index for all cancers combined
- Overall (all-ages) net survival
- Site specific levels of survival: lung, colorectal and breast
- Survival by age group: all adults (15-99 years), 55-64 years, 75-99 years.

*Part 2*

The explanatory factors - here we reviewed how well the CCG performed across a wide range of measures (thirty-three).

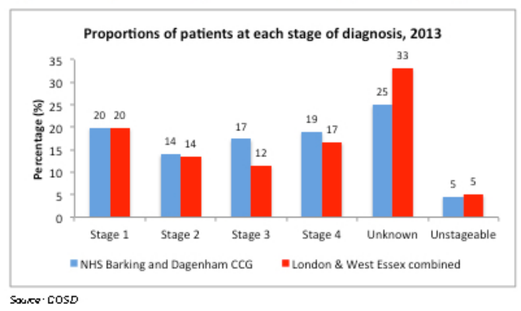
Table 1: Summary of one-year net survival index by CCG

| CCG | 15-99ys | 55-64ys | 75-99ys |
|---|---|---|---|
| Barking and Dagenham | | | |
| Barnet | | | |
| Bexley | | | |
| Brent | | | |
| Bromley | | | |
| Camden | | | |
| Central London (Westminster) | | | |
| City and Hackney | | | |
| Croydon | | | |
| Ealing | | | |
| Enfield | | | |
| Greenwich | | | |
| Hammersmith and Fulham | | | |
| Haringey | | | |
| Harrow | | | |
| Havering | | | |
| Hillingdon | | | |
| Hounslow | | | |
| Islington | | | |
| Kingston | | | |
| Lambeth | | | |
| Lewisham | | | |
| Merton | | | |
| Newham | | | |
| Redbridge | | | |
| Richmond | | | |
| Southwark | | | |
| Sutton | | | |
| Tower Hamlets | | | |
| Waltham Forest | | | |
| Wandsworth | | | |
| West London | | | |
| West Essex | | | |

Legend
CCG consistently above England values
CCG trend line crossing England trend line
CCG consistently below England values

*Underlying data source: London School of Hygiene and Tropical* Medicine, published on ONS website.

Figure 25: Proportions of patients at each stage of diagnosis, 2013




Source: COSD

## 5. Reflections on the work

- Many CCGs responded positively to the CCG reports and to additional Strategic Planning Group (SPG) level summaries produced by the TCST
  - Whilst initial feedback is encouraging, evaluation of the utility of the reports would be instructive

*Layout, benchmarking and easy comparisons to local CCGs all great.*

- Timeliness of data is important; the scale of the task was such that the next release of the index had been published before all of the CCG reports had been published
  - The work was considerable and not sustainable; alternative approaches to dissemination of similar reports should be considered e.g. an extension to the current PHE Fingertips cancer services profiles
  - Making available an online repository of underlying data could add value for users

*These really area great and hopefully, with a little guidance, will really focus some of the work CCGs are doing.*

- The relationship between overall index value and the explanatory factors is unclear from this initial work and further analysis may be instructive
  - Further work is needed to qualify the absolute and relative impacts of individual explanatory factors on survival.

*What a well written report!*

**Learn from yesterday, live for today, hope for tomorrow. The important thing is not to stop questioning** Albert Einstein

## 8. References

[1]http://www.ons.gov.uk/ons/rel/subnational-health4/avoidable-mortality-in-england-and-wales/2013/stb.html
[2]https://www.england.nhs.uk/wp-content/uploads/2012/12/ccg-ois-2015-glance.pdf
[3]http://www.theguardian.com/society/2015/mar/24/uk-cancer-survival-rates-trail-10-years-behind-those-in-european-countries
[4]http://www.ons.gov.uk/ons/rel/cancer-unit/a-cancer-survival-index-for-clinical-commissioning-groups/adults-diagnosed-1997-2012-and-followed-up-to-2013/index-of-cancer-survival-for-clinical-commissioning-groups.html