

# National Breast Cancer Audit - update

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12.03.2013

# National Cancer Audits: what's out there now?

- Lung cancer (LUCADA)\*
- Head and Neck cancer (DAHNO)\*
- Colorectal cancer (NBOCAP)\*
- Upper GI Cancer
- Prostate Cancer (contract awarded October 2012)
- Breast cancer: Mastectomy and reconstruction  
(there is agreement to procure a new, more  
comprehensive breast cancer audit in 2013)



NCAPOP:  
NATIONAL CLINICAL AUDIT AND PATIENT  
OUTCOMES PROGRAMME

# What is the Future Vision for National Cancer Audits?

(Or - how we get best value for money!)

- Progress to date with national cancer audits
- Progress generally with cancer intelligence
- Alignment with Cancer Intelligence Strategy
- How best achieved, managing transition of existing audits

<b>Domain 1</b>	Preventing people from dying prematurely	<b>Effectiveness</b>
<b>Domain 2</b>	Enhancing quality of life for people with long-term conditions	
<b>Domain 3</b>	Helping people to recover from episodes of ill health or following injury	
<b>Domain 4</b>	Ensuring people have a positive experience of care	<b>Patient experience</b>
<b>Domain 5</b>	Treating and caring for people in a safe environment and protecting them from avoidable harm	<b>Safety</b>

- Common IT platform linking to Cancer Registration Systems
- Focus on standards of care and outcomes
- New cancer data collections\*:
  - cancer waiting times CWT
  - Radiotherapy RTDS
  - Systemic Anti-Cancer Therapy SACT
  - Diagnostic Imaging DIDS
  - Cancer Outcomes Services Dataset COSD
- National Cancer Intelligence Network (NCIN)

\*All with ISB approval and mandated for collection within the NHS in England

- Professional leadership, engagement and ‘ownership’ is vital
- BUT – we can’t just rely on ‘good will’
- Trusts’ data collection burden already high
- Avoid duplication by registries and audits
- Recognise who our ‘customers’ are
  - Patients/Public
  - Commissioners
  - Clinicians/Providers

# ‘added value’

- more in depth examination of specific areas
  - Patient diagnosis, management and outcomes
  - Intermittent ‘snapshot’ audits
- **ENCORE** (English National Cancer On-line Registration Environment)
  - possibility of additional data entry for national cancer audits at minimal cost
  - Breast Cancer Audit (BCCOM) pilot successful

# Much possible from existing data

- Linkage of cancer registration, HES data and cancer waits data in a single National Cancer Data Repository (NCDR) facilitates analysis
- Some objectives of national cancer audits achievable with routinely collected information
- BUT there are some weak areas.....



# Gaps – information, and outcomes (ICBP)

- Pre-diagnosis
- Performance status
- Comorbidity
- Recurrence data
- Input of Clinical Nurse Specialists
- Access to palliative care
- Complications of treatment
- Quality of life

# Resumé of ideas for national breast cancer audit

NCIN Breast Workshop

19 March 2012

# Diagnosis

- Pre treatment assessment
  - Imaging & Pathology
  - MDT decisions: was decision followed?
- Who told you you had breast cancer?
  - surgeon, nurse, radiologist, radiographer
- Investigations
  - Impacts of digital mammography, US, MRI

# Pathway

- Waiting times
  - Triple assessment, Staging, Surgery, Adjuvant therapy
- Number of clinic visits in pathway
- Discussion of options
- Effect of targets on pathways for patients
- Continuity of medical & specialist nurse care

# How MDT delivers the Treatment Plan

- Full Clinico-pathological staging
- Oncology input from outset
  - Neo-adjuvant therapy
  - Variation in chemotherapy practice
- Reconstructive & Oncoplastic Surgery
  - Availability and suitability of all techniques
  - Breast conservation and mastectomy

# Epidemiology & Demographics

- Socio-economic status
  - Age; occupation; immigration; stage of presentation;
  - →impact of treatment & survival rates
- Elderly – early disease
  - NICE Breast Quality Standard 6
  - Prospective collection of treatment of over 75s
- Variation in Rx regarding ethnic group and disability

- Standards
- Relevant
- Adaptable
- Accessible
- Feedback
- Support trial (recruitment and follow up)

# Outcomes

- Local Recurrence
- Distant Metastasis
- Survival
- Patient Experience



# National Breast Audit - original submission

- To look at the ***process of care of all patients, all treatments, and all relevant outcomes***
  - short and long-term clinical outcomes, PROMs, recurrence and survival
  - impact of changes in early management
  - include palliative care
  - ongoing as opposed to limited time
  - minimise data collection burden
  - feedback to participating organisations
  - designed and delivered in partnership

# Specific audit objectives in proposal

1. **Pre-treatment assessment processes** - including whether patients with early invasive breast cancer are undergoing ultrasound assessment and needle biopsy of the axilla, translation of MDT decisions into clinical management, development of written care plans
2. Whether **patients suitable for breast conservation are offered appropriate surgery including oncoplastic procedures**, such that there is adequate removal of the tumour (resulting in clear resection margins) with good cosmetic outcome, and whether neo-adjuvant therapy is offered to increase the possibility of breast conserving surgery for larger tumours
3. Whether **women suitable for mastectomy are offered breast reconstruction**
4. Whether, for patients with invasive breast cancer, **pathological information (size, grade, nodal status, ER and HER2 status) is available at the first relevant multi-disciplinary team meeting**

# Specific audit objectives in proposal

5. The **time delay between important aspects of care** (between diagnosis and start of treatment, and date of surgery and start of adjuvant *treatment*)
6. The **use of adjuvant radiotherapy, chemotherapy and hormonal** therapies in patients with different tumour characteristics and given the type of surgery chosen
7. The **quantity and quality of the information provided to patients** at various stages in the diagnosis and treatment pathway
8. Whether **patients were offered sufficient information to make informed decisions** regarding clinical trial participation.

# National Breast Cancer Audit Stakeholders

- Association of Breast Surgery
- British Association of Plastic, Reconstructive and Aesthetic Surgery
- Royal College of Surgeons of England (Clinical Effectiveness Unit)
- RCR (Royal College of Radiologists) Clinical Radiology
- RCR (Royal College of Radiologists) Clinical Oncology
- Royal College of Pathologists
- Royal College of Nursing
- NHS Breast Screening Programme
- National Cancer Intelligence Network
- United Kingdom Association of Cancer Registries
- West Midlands Cancer Intelligence Unit
- NHS Information Centre
- Breakthrough Breast Cancer
- Breast Cancer Care



NCIN Breast  
SSCRG

# HQIP Process

- Specification development meetings
  - HQIP review of proposal design features against DH commissioning requirements
  - Discuss risks and consider need for refinements and additions
- Tender for a provider (OJEU in accordance with EU requirements )
  - Contract duration
  - Contract Value
  - Programme Aims