National Cancer Intelligence Network (NCIN)

Cancer Intelligence in PHE

Yorkshire and the Humber 3rd Cancer Symposium, 3rd December 2015
Jason Poole, Deputy Head: Local Interface
Current and Recent Activity

- Publication of the Five Year Forward View – big cancer focus
  - Upgrade prevention and public health
  - Achieve earlier diagnosis
  - Patient experience on a par with clinical effectiveness and safety
  - Support people living with and beyond cancer
  - Investment to deliver a modern high-quality service
  - Overhaul processes for commissioning, accountability and provision
- Organisational restructure within Public Health England
- New PHE Cancer Board
- Awaiting report of the Forman Review
PHE’s role across the cancer pathway

- **Prevention**
  - Behavioural factors
  - Hazards*
  - Immunisation and the prevention of infection-related cancers
  - Health marketing
  - Screening
- **Diagnosis**
- **Treatment**
- **Survivorship**
- **End of Life Care**
  - Preventing infection-related morbidity and mortality in cancer patients
  - Supporting innovation and improvement in End of Life Care

**Data & intelligence**

**Reducing inequalities and addressing the structural determinants of health**

**Supporting the commissioning of NHS cancer services**

*Including radiation, chemical and environmental hazards*
Chief Knowledge Officer’s Directorate

CKO: John Newton

Research

Research and development
Deputy Director
Bernadette Hannigan

Data

National disease registration
Deputy Director
Jem Rashbass

Information and Intelligence

Knowledge and intelligence service
Deputy Director
Peter Bradley

Digital

Digital programme
Deputy Director
Diarmaid Crean

Business

Business planning and commercial development
Deputy Director
Sian Nash

Yorkshire and the Humber 3rd Cancer Symposium - Cancer Intelligence in PHE
National Cancer Intelligence Network

• Helps understand where to focus activity to address inequalities in cancer

• National Cancer Registration Service gathers and quality assures detailed clinical information from across the whole cancer pathway

• We lead and support the translation of knowledge and intelligence into strategic advice and policy for NHS England commissioners on drugs, interventions, and national service specifications

• Big variations in cancer incidence, prevalence, diagnosis, treatment and survival, and in patient experience and quality of care

• Large work programme, delivered with partners, that generates new knowledge about cancer across the patient pathway.

• Aims to highlight and improve understanding of these variations
Who do we produce intelligence for?

- NHS England (e.g. specialist commissioning)
- Clinical Commissioning Groups
- Clinicians & Clinical Teams
- Health Care Providers
- Local Government
- NICE
- CQC
- Research Community
- National Statistics
- International (e.g. ICBP)
- Cancer charities
- Patients and the public
NCIN work is:

Local
- Requested or prioritised by local stakeholders, or concerning only one locality.

Site specific
- Requested or prioritised by the Site Specific Clinical Reference Groups, or concerning only one cancer site.

Central
- Everything else i.e. national cross-site work, that can include site elements and local elements.
Recent publication examples (1 of 2)

- **Routes to Diagnosis 2006-2013** (workbook, short report and blog)
- **Linkage of the English Cancer Patient Experience Survey to cancer registration data** (data briefing and technical summary)
- **Variation in delivery of radiotherapy for patients with Lymphoma** (report)
- **Childhood Cancer Mortality in the UK and Internationally, 2005 – 2010** (report)
- **Specialist Surgery for ovarian cancer in England** (journal paper and briefing)
- **Relative survival in Upper gastrointestinal cancer patients in England, by socioeconomic deprivation** (report)
- **Stage data by CCG 2015** (workbook)
Recent publication examples (2 of 2)

- NCIN Equality Metrics Report 2015
- 20-year cancer prevalence in the UK (workbook and posters)
- Be Clear on Cancer: Oesophago-gastric cancer awareness regional pilot campaign: Interim evaluation report
- Rare and less common cancers (report)
- National trends in CWT metrics, 2009/10 - 2013/14 (data briefing)
- Older people and cancer (report)
- Major resections by cancer site; 2006 to 2010 (report and workbook)
- The third all breast cancer report. Back to basics: Breast cancer incidence and mortality
- Living with and beyond ovarian/womb/cervical cancer (PROMs reports)
Other NCIN activity

Toolkits and indicators – including Clinical Headline Indicators

GP profiles

Cancer roadshows (with NHS colleagues)

Be Clear on Cancer evaluation

Site Specific Clinical Reference Groups – meetings and workshops

National Cancer Outcomes Conference

Supporting local cancer intelligence

Partnerships with charities and academic institutions
Top ten analytical priority areas

1. Care pathways
2. Routine and automated outputs
3. Cancer Analysis System (CAS) resource
4. Cancer Survival
5. Local cancer intelligence function
6. Patient Experience
7. Early Diagnosis
8. Recurrence
9. Commissioned pieces of work
10. Cost and value
Opportunity: linking huge datasets

MSCC 7th annual meeting: NCIN update

- Treatment datasets: Systemic Anti-Cancer Therapy (SACT), Radiotherapy Dataset (RTDS), Hospital Episode Statistics (HES), Cancer Waiting Times (CWT)
- CNS: Clinical Nurse Specialist
Local Knowledge & Intelligence Service

- Head of LKIS: Jake Abbas
- LKIS Associate Director Yorkshire & the Humber: Barbara Coyle
- Deputy Head of NCIN (Local Interface): Jason Poole
  - Linking local work nationally
- PHE Centre: Martyn Regan (Director), Matt Day (HCPH)
  - Cancer within Public Health
- LKIS Cancer: Verity Bellamy (lead), Sarah Lawton, Russel Bulmer
  - Disseminate national outputs locally
  - Stakeholder work programmes: NHS, local government
  - Ad hoc requests
Cancer, heart disease, obesity and diabetes are becoming more prominent concerns

Q3. Please tell me which, if any, of the following public health issues you are most concerned about these days? (Prompted)

- **Cancer**: 43%  (↑4)
- **Dementia**: 25%  (↑9)
- **Heart disease**: 21%  (↑5)
- **Obesity**: 20%  (↑6)
- **Mental health**: 18%  (↑5)
- **Diabetes**: 17%  (↓5)
- **Illnesses related to ageing***: 12%  (↓1)
- **Smoking**: 11%  (↓4)
- **Drug abuse**: 10%  (↓4)
- **Alcohol abuse**: 10%  (↓2)
- **Stroke**: 9%  (↓2)
- **Infections from hospitals/clinics…**: 7%  (↓2)
- **Air pollution**: 6%  (↓2)
- **Infectious diseases**: 5%  (↑2)
- **None of these**: 6%  (↓2)

Base: All participants (2015: 1,631, 2014:1,625). *This response option was labelled 'age-related illnesses'

Source: Ipsos MORI
National Cancer Intelligence Network (NCIN)

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