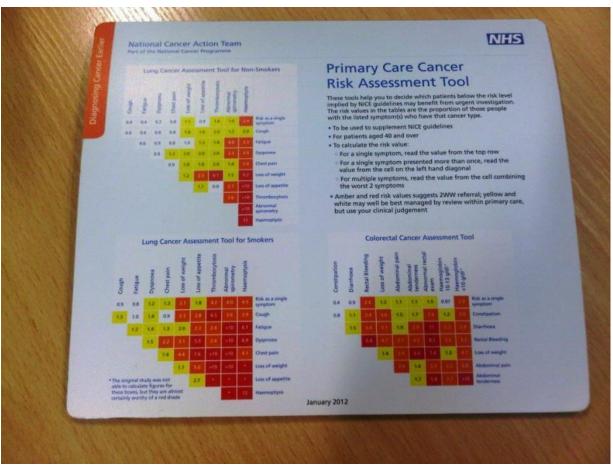


Impact on Commissioners and policy makers

Cancer Reform Strategy 2007
NAEDI Programme
Increased access to diagnostics
ACE programme
Revision of NICE guidance CG27



Risk Assessment Tool for Colorectal Cancer

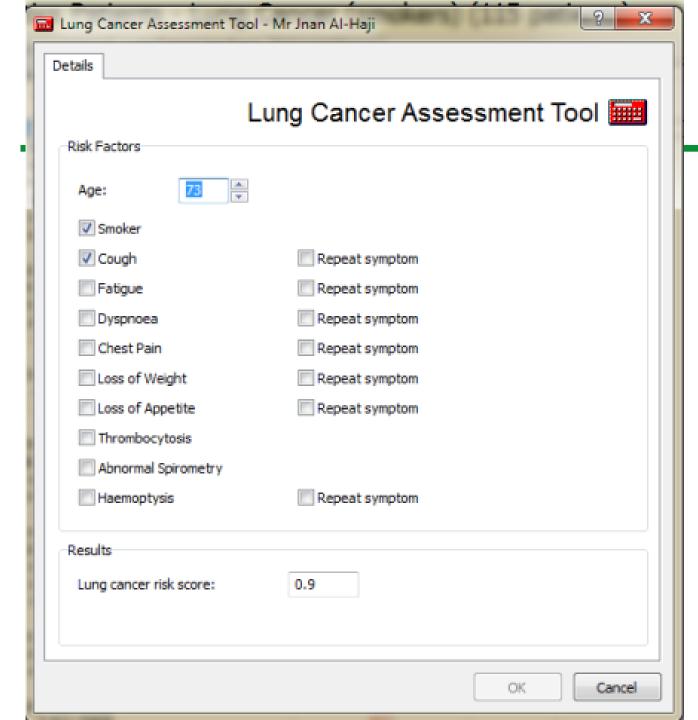


Piloted in 152
practices in England in
2010 over a 6-month
period
Compared to previous
6 months, it resulted
in:

- •Increase in referrals for suspected cancer
- •Increase in number of colonoscopies
- •Increase in number of colorectal cancers diagnosed

Hamilton et al BJGP 2013







Impact of Risk Assessment Tool: Colorectal cancer

	Before				After					
Colorectal Cancer	Referral Rate	LCL	UCL	Referral Rate	LCL	UCL	Change	LCL	UCL	P-value
RAT	202.6	200.3	204.9	306.8	304.0	309.7	51.5%	49.3%	53.7%	<0.001
No RAT	202.8	201.5	204.2	297.5	295.9	299.2	46.7%	45.4%	48.0%	< 0.001

	Before									
Colorectal Cancer	Conversion Rate (%)	LCL	UCL	Conversion Rate (%)	LCL	UCL	Change	LCL	UCL	P-value
RAT	7.5	7.2	7.8	5.5	5.3	5.7	-2.0	-2.3	-1.6	<0.001
No RAT	7.4	7.3	7.6	5.6	5.5	5.8	-1.8	-2.0	-1.6	< 0.001

	Before									
Colorectal Cancer	Detection Rate (%)	LCL	UCL	Detection Rate (%)	LCL	UCL	Change	LCL	UCL	P-value
RAT	37.6	36.4	38.8	39.5	38.4	40.7	2.0	0.3	3.6	0.020
No RAT	37.7	37.0	38.5	40.3	39.6	41.0	2.6	1.6	3.5	<0.001

Colorectal Cancer	Before									
	Emergency Presentation Rate (%)	LCL	UCL	Emergency Presentation Rate (%)	LCL	UCL	Change	LCL	UCL	P-value
RAT	23.7	22.7	24.7	22.5	21.5	23.5	-1.2	-2.6	0.3	0.111
No RAT	23.8	23.3	24.5	21.7	21.1	22.3	-2.2	-3.0	-1.3	< 0.001



Revision of NICE guidance CG27

- Evidence from Caper studies progressively undermined CG27 (2005)
- Incorporation of RATs in referral pathways via local vehicles e.g. LES
- Role of Cancer Networks and emergence of GP cancer leads
- Revised guidance to be published June 2015



ACE – Accelerate, Co-ordinate, Evaluate

OBJECTIVE – to develop a national body of evidence and evaluation that informs the operational improvement of early diagnosis cancer pathways through the 16/17 and 17/18 commissioning rounds



IMPACT 1 – 10 percentage points improvement in early diagnosis (Stage 1&2: 56.4% to 66.4%)

IMPACT 2 – Decrease number of cancer diagnoses via emergency to < 25% of total

IMPACT 3 – Improved patient experience

Concepts to Explore (from Cancer FYFV Supplement)

Direct / Access to rapid diagnostics

Proactive approach to high risk individuals

Pathway for vague symptoms

Multi-disciplinary diagnostic centre

Increased role for non-GP primary care clinicians

Lowering referral thresholds

Self-referral