NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

CLINICAL COMMISSIONING GROUP OUTCOMES INDICATOR SET (CCG OIS) INDICATOR DEVELOPMENT PROGRAMME

Consultation report on potential CCG OIS indicator(s)

CCG OIS indicator area: Breast Cancer

Consultation period: 1 February – 1 March 2013

Potential output: Recommendations for NICE menu

Contents

Introduction

The following report provides a summary of the responses received from the recent consultation on potential new indicators for the 2014/15 Clinical Commissioning Group Outcomes Indicator Set (CCG OIS). The Committee is asked to consider the results of consultation alongside testing reports produced by the Health and Social Care Information Centre.

Indicator(s) included in the consultation

ID	Indicators	Domain	Overarching/Improvement area	Source
BC30	Breast cancer mortality rates	1	Reducing premature mortality from the major causes of death	Quality Standards
BC32	Recurrence rates of breast cancer by site and type of primary surgery	1	Reducing premature mortality from the major causes of death	Quality Standards

Thematic analysis of consultation responses

Indicator

BC30 Breast cancer mortality rates

Thematic analysis

Cancer Research UK supported the inclusion of this indicator, commenting that breast cancer mortality rates are important in assessing progress towards improving outcomes for people with breast cancer. It was also commented that data for this indicator are relatively easy to collect, and therefore implementation at CCG level should be straightforward.

Another stakeholder commented that breast cancer mortality rates are affected by screening uptake, for which currently there are variations, and that screening uptake can be influenced by CCGs.

One commercial stakeholder supporting the indicator commented that it is useful to measure total breast cancer mortality and not just the 1 and 5 year rates. They felt this indicator would help improve the prognosis of people with breast cancer throughout the treatment pathway. They added that this indicator would help recognition of the need for optimised management of people with advanced or metastatic disease.

One CCG commented that it may be more useful to measure survival rates. They also suggested that this information would be useful for all cancers and not just breast cancer.

Indicator

BC32 Recurrence rates of breast cancer by site and type of primary surgery

Thematic analysis

Cancer Research UK commented that this indicator would be a valuable addition to the CCG OIS. They felt that this indicator could drive improvements in the way breast cancers are treated when first diagnosed. They also suggested that breaking the data down by type of primary surgery would make this indicator even more useful.

One stakeholder suggested that it is important to clarify whether local or distant recurrence is being measured by this indicator as these are different issues. The Royal College of Radiologists also considered the need to further define the indicator, querying whether the 'site' is referring to the site of the primary cancer or the site of the recurrence.

The Breast Cancer Campaign supported the inclusion of this indicator because limited information has been available on recurrence rates of breast cancer. They felt this indicator would help drive the improvement of services, but commented that the wording and intention of the indicator might need further consideration to ensure it appropriately incentivises improvements in treatment. It was suggested that as currently written, the information gained

from the indicator many not be sufficient to understand why recurrence occurs.

One stakeholder commented that systems need to be in place in acute trusts to ensure the information for this indicator is measured and recorded accurately.

The Royal College of Radiologists suggested that an additional indicator looking at mastectomy with immediate reconstruction rates would be useful.