NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

NICE indicator guidance

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## Indicator CCG01

The proportion of invasive cases of cancer diagnosed via an emergency route.

## Indicator type

Clinical commissioning group indicator

## Rationale

Approximately a [fifth of people with cancer](http://www.ncin.org.uk/publications/routes_to_diagnosis) are diagnosed via emergency routes. Survival rates for people diagnosed via emergency routes are considerably lower than for other cancer patients. By identifying the proportion of people who first present as an emergency, it is likely to prompt investigation into why these people did present as emergencies and how some patients could have presented earlier via a different route. An increase in the proportion of people who present through more managed process will correspond with improved outcomes. Therefore, this indicator is useful for assessing improvements in early diagnosis.

## Source guidance

[Suspected cancer: recognition and referral. NICE guideline NG12](https://www.nice.org.uk/guidance/ng12) (2015)

## Specification

Numerator: The number in the denominator where the first presentation to secondary care was via an emergency route.

Denominator: The number of cases of invasive cancer.

Calculation: (Numerator/denominator)\*100

Exclusions: People diagnosed with non-melanoma skin cancer.

Data source: Cancer Analysis System (CAS), National Cancer Intelligence Network (NCIN).

Minimum population: The indicator would be appropriate to assess performance of individual CCGs.

## Further information

This is NICE indicator guidance, which is part of the [NICE menu of indicators](https://www.nice.org.uk/Standards-and-Indicators/index). This document does not represent formal NICE guidance.