



TE AHO
O TE KAHU
CANCER
CONTROL
AGENCY



Sector Update - May 2022

Tēna koutou katoa

It has been a busy start to the year both for the wider cancer sector and for Te Aho o Te Kahu. I would like to acknowledge the incredible work of health professionals across the cancer continuum who are doing everything they can for whānau with cancer while COVID-19 circulates in our communities. This year, people with cancer have navigated diagnosis and treatment while balancing the risks posed by COVID-19 exposure. Whānau have wrapped care around their cancer patients, and we have worked closely with Hei Āhuru Mōwai, Māori Cancer Leadership to create [guidance for whare \(households\) with cancer](#).

This update gives an overview of a number of key pieces of the Agency's work programme including: monitoring and managing the impact of COVID-19 on cancer diagnosis and treatment, planning cancer services in the context of the health system reforms, the cancer medicines availability analysis, updates on the Quality Performance Indicator programme, ACT-NOW and Structured Pathology, and an introduction to our Pacific Research Project and Cancer Pathways programme.

There is a lot to read – but there is a lot that we are doing to ensure fewer cancer, better survival and equity for all.

Ngā mihi

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COVID-19 and Cancer

Our [series of COVID-19 and cancer services reports](#) use available data to monitor potential delays to cancer diagnosis and treatment. These are used to support policy development and response planning. Our most [recent report was released in mid-April](#) (covering January and February 2022) and captures the initial stages of the Omicron outbreak. A summary of key findings can be found on page four of the report.

The impacts identified in this report are not as significant as the decline seen in April 2020 and show that the health sector has been working hard to ensure cancer services continue with as little disruption as possible. However, disruption due to the Omicron outbreak was not unexpected and we will have a clearer picture of the extent of this when we release our next report (covering March 2022, released end of May). We are taking a number of actions to address the impact of COVID-19 on cancer diagnosis and treatment including moving from bimonthly to monthly monitoring, working with the sector to address problems identified and prioritising Māori and Pacific populations in any catch-up activities.

Cancer Services Planning

Over the last year Te Aho o Te Kahu has undertaken a comprehensive programme of work to develop a vision for the future delivery of cancer treatment services. This work sets out a detailed vision for cancer services in the future. It focuses on achieving equity, being person-centred, sustainable and high quality. This work systematically reviewed the way services are currently delivered, and outlines transformational actions Te Aho o Te Kahu, Health New Zealand and the Māori Health Authority can take to improve cancer treatment services in Aotearoa. We will

be sharing the full report detailing this work and you will be able to see it on our website in the coming months. This work included considerable stakeholder engagement, with nearly 100 individual and group sector engagements, and insights gained from 13 Māori cancer community hui held across Aotearoa – with around 2800 attendees. The report has had considerable input from Hei Āhuru Mōwai, the Māori Cancer Leadership Network, He Ara Tangata (our Consumer Reference Group) and clinical working groups. Thank you to all those who provided invaluable input.

Over the last four months we have been working closely with the Transition Unit to support the development of the Interim NZ Health Plan and incorporate priorities from our cancer services planning work. As we move into this next phase, we shift our focus towards implementation. We have structured the mahi across seven projects: surgery, radiation oncology, systemic anti-cancer treatments, stem cell transplants, coordination and support services, optimal care pathways and workforce. I am meeting with the Chief Executives of the Interim Health New Zealand and the Interim Māori Health Authority regularly to discuss how we can support their implementation of transformational change that will achieve optimal and equitable cancer outcomes and whānau experience in Aotearoa. He Ara Tāngata, Hei Āhuru Mōwai, Māori Cancer Leadership, along with clinical working groups will continue their support of this important mahi. We look forward to engaging further as the programme progresses throughout the year.

If you would like to know more about this work, please contact our programme leads Elinor.Millar@teaho.govt.nz and Aviette.Musin@teaho.govt.nz.

Cancer Medicines Availability Analysis

On 28 April we released our analysis of cancer medicines availability - [Understanding the Gap: an analysis of the availability of cancer medicines in Aotearoa](#). Increasingly, concerns have been raised about the availability of certain cancer medicines in Aotearoa compared with their availability in similar countries. It is these concerns that motivated us to publish this report. This release represented an important first step in understanding where there are opportunities to improve access to cancer medicines for people in Aotearoa. We wanted to understand more about the gaps in cancer medicines, to inform our work and the advice we give to Government, as well as to provide useful insights to Pharmac. We appreciate the

feedback we have received and we hope this analysis will benefit those living with cancer and their whānau. Of course, the funding of medicines is just one part of achieving equitable access to effective cancer treatment - there is much more to be done to ensure that we can achieve better cancer outcomes for all.

New! Optimal Cancer Care Pathways

Te Aho o Te Kahu is in the very early stages of commencing a project aimed at defining optimal cancer care pathways for Aotearoa. We will be building on the [work done by Cancer Australia](#) to create appropriate versions for Aotearoa - with changes being made to reflect our population mix, equity issues and context (such as available medicines and technologies). Cancer Australia have recently updated the literature and evidence base for their detailed guides and have given us permission to reference them, which means that we can build on these without having to repeat the discovery phase. The aim of our project is to provide cancer-specific resources that map the key stages in a cancer patient's journey and the expectations for optimal care. Initially we hope to produce approximately five draft pathways as a pilot project to inform the development of the remaining documents. We will be engaging with key experts and stakeholders regarding the project over the coming months. We will share more information with you in future updates.

New! Pacific Research Project

Te Aho o Te Kahu has been working with Moana Research to explore Pacific cancer pathways to diagnosis, treatment, follow-up after treatment, support and the handover back to primary health care.

We want to understand at what points along the cancer pathway Pacific peoples experience breakdowns in the system or face challenges and barriers. We also want to explore further where they have received support. This research will follow an empowerment approach where Pacific stories and perspectives are championed.

This project aims to empower consumers and fānau voices through storytelling and talanoa and will enable us to hear and understand the lived experiences of those recently or currently impacted by cancer. The five key areas of focus are:

1. What effective supportive care looks like for Pacific patients and fānau who are being diagnosed, treated or in post-treatment.
2. Understanding factors that impact on Pacific people's access to cancer care and treatment.
3. What mechanisms may be needed to support Pacific people to access timely, culturally relevant and effective cancer care and services?
4. Understanding the impact of supportive care in post-treatment and remission stage of cancer, for patients and fānau.
5. Are there differences in access within the Pacific population between those from realm countries compared to those that are not?

This project will inform the work of Te Aho o Te Kahu in identifying opportunities to improve cancer coordination and supportive care for Pacific people and their fānau during cancer treatment. The findings will be released later this year.

Quality Performance Indicator Programme Update

[Quality performance indicators \(QPIs\)](#) are used to improve the quality of cancer services and deliver better outcomes for people diagnosed with cancer. They enable district health boards (DHBs) to compare their performance with other DHBs. QPIs are selected by an expert working group (WG) with consumer representation and a range of clinical experts involved in providing patient care. To date, we have selected, calculated and reported on QPIs for bowel, lung and prostate cancers. Currently we are working on QPIs for breast and pancreatic cancers.

Bowel cancer quality performance indicators

Te Aho o Te Kahu and the national Bowel Cancer WG have worked together to recalculate the bowel cancer quality performance indicators that were first calculated

using data from 2013-2016 and published by the Ministry of Health in March 2019. The report published QPI data for patients diagnosed with bowel cancer in Aotearoa New Zealand from 2017 to 2019. The [Bowel cancer QPI monitoring report update 2022](#) was released to DHBs in draft at the start of March and finalised and published at the end of April.

Breast cancer quality performance indicators

After calling for nominations via our website and via key stakeholders, Te Aho o Te Kahu convened a national Breast Cancer QPI WG late last year. Its role is to work with us to identify potential breast cancer QPIs that we hope to consult on towards the middle of this year. Once the breast cancer QPIs are finalised after public consultation, they will be calculated using data from the New Zealand Cancer Registry and Ministry of Health national data collections for patients diagnosed with breast cancer in Aotearoa New Zealand from 2017 to 2019. If you are interested in responding to this consultation, please let us know by emailing queries@teaho.gov.nz or keep an eye on the [Te Aho o Te Kahu consultation page](#).

Pancreatic cancer quality performance indicators

Te Aho o Te Kahu and the national Pancreatic Cancer WG have finalised the pancreatic cancer QPI descriptions after receiving feedback via the public consultation process in October 2021. The indicators are now being calculated and we hope to publish the results later this year.

NEW! Universal Quality Performance Indicator Project

The next project for the QPI programme, following the completion of the pancreatic and breast cancer QPI projects, is the selection, calculation and reporting of universal QPIs. The universal indicators will be common across many cancer types and will be reported by cancer type. As we have calculated QPIs for different cancer types to date (bowel, lung, prostate, breast and pancreas) we have identified consistent indicators that are both measurable and universal across different cancer types. Shifting from the current approach of doing QPIs one cancer type at a time to doing QPIs for many cancers at the same time will mean that more cancer types get QPIs identified, calculated and reported faster than would otherwise have been the

case. Te Aho o Te Kahu expects that calculating and reporting on the universal QPIs will support quality improvement in cancer services as well as Te Aho o Te Kahu quality improvement activity. We aim to report on the universal QPIs in 2023 and recalculate at regular intervals in order to measure change over time.

Anti-Cancer Therapy – Nationally Organised Workstreams (ACT-NOW) update

The ACT-NOW programme looks at how chemotherapy is being delivered across the motu and uses national data to identify ways chemotherapy can be improved. Although affected by COVID-19, [ACT-NOW regimen development and publication](#) has continued. 18 of 20 regimen development workshops have now been held and ACT-NOW is scheduled to have all regimens across adult medical oncology and haematology published to the [SACT Regimen Library \(SRL\)](#) by September 2022. A huge thank you to all who have found time to participate in these workshops.

The ACT-NOW data specification, outlining key data items for the national collection to support analyses into equity, clinical quality, and resource planning, went out for public consultation in March, and is expected to be finalised by June 2022.

We are working closely with the Ministry of Health Data and Digital to design and build the IT infrastructure to receive, validate, store, link and analyse ACT-NOW data. This infrastructure and the associated processes relating to data submission and data quality are being loosely modelled on the national [Radiation Oncology Collection \(ROC\)](#).

Test data have been collected from all public providers using electronic information systems and is supporting the development of prototype analyses, with the purpose of deriving early insights from ACT-NOW data and informing data quality/completeness activities. We will continue to work closely with DHBs and providers on these planning and implementation activities.

If you would like more information on ACT-NOW, contact Alexander.Dunn@teaho.govt.nz

Structured Pathology update

Te Aho o Te Kahu is committed to working in partnership to improve the relevance, shareability, accessibility and security of cancer information in Aotearoa New Zealand.

For pathology services, we believe it is critical that our laboratory systems collect, report and share the data needed for timely clinical decision-making. After stakeholder discussions in 2021, we undertook a proof-of-concept to test requirements to codify Thoracic (Lung, Pleura, and Thymic) pathology protocols into HISO (Health Information Standards Organisation) endorsed data standards. A data standard identifies and describes the clinically relevant data elements required for each cancer. A working group led by Dr Michael Lau (Southern Community Labs, Dunedin) reviewed the related protocols and confirmed a final draft dataset.

Pathologist-led working groups supported by sector partners are being progressively established to develop the next tranches of data standards. Our work is aligned with the protocol development schedule led by the ICCR (International Collaboration on Cancer Reporting) and adapted by RCPA (Royal College of Pathologists of Australasia).

To help our clinicians and subject matter experts efficiently review the data elements, we have developed a web browser tool that mirrors the pathology requesting and reporting workflow to ensure our data standards are high quality.

In early May 2022, the HISO sub-committee that was set up to support this work approved the first three data standards for Lung, Thymic and Pleural. Work is well underway on gynaecological, haematological, and urinary so many more standards will be developed over the coming year.

We are not underestimating the many challenges the sector faces to successfully implement these data standards over the coming years. We will continue working closely with clinicians to ensure the data standards remain clinically relevant, and with our providers/vendors to ensure they are implemented consistently across all providers. This includes undertaking pilots and supporting sector led initiatives to fully realise the benefits for decision-making and equity focused improvements efforts.

If you would like to know more, please contact John.Manderson@teaho.govt.nz or Veronica.Dessein@teaho.govt.nz

Telehealth in Cancer Care

Providing high quality cancer care for all patients no matter who they are or where they live have never been more important, particularly with COVID-19 in the community and the Health Reforms.

A recent [Telehealth in Cancer Care webinar](#) hosted in association with the New Zealand Telehealth Forum was moderated by Sasha Webb, equity lead at Te Aho oTe Kahu and Chair of the Telehealth Cancer Working Group. Sasha was joined by Elinor Millar, our public health physician and Jo Stafford, a member of He Ara Tangata, our consumer reference group, and other experts to look at the important role telehealth can play in cancer care.

[Telehealth online learning modules](#) have also been released to give health professionals access to all of the information and tools they need to prepare for and conduct effective, culturally competent, patient-centred telehealth consultations.

Farewell



Since November 2017 the [National Child Cancer Network \(NCCN\)](#) has been in the safe hands of Elizabeth Ryan, NCCN Programme Manager. Sadly, Elizabeth will be finishing up with NCCN this Wednesday and we wanted to take this opportunity to thank her for her hard work and dedication to child cancer services in Aotearoa. Elizabeth is passionate about improving care and outcomes for children and whānau and has led and managed many projects, ensuring that equity is woven into all aspects of NCCN's structure and work programme. We wish her well for the future.