National Audit of Cancer Diagnosis in Primary Care

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Cancer Reform Strategy: 2007

“15. A new National Awareness and Early Diagnosis Initiative will coordinate a programme of activity to support local interventions to raise public awareness of the signs and symptoms of early cancer and encourage people to seek help sooner. This will include developing a tool for measuring awareness levels and supporting high quality evaluations of pilot projects.”

“16. We also want to understand more about the nature and extent of delays in cancer diagnosis. A national audit in primary care of newly diagnosed cancers will be used to make decisions about how best to provide more support to primary care professionals to ensure the early diagnosis of cancer.”
Cancer Reform Strategy: 2007

“3.63 Findings from the national audit will then be used to make decisions about how best to provide more support to primary care professionals to ensure early diagnosis of cancer. We will discuss with the RCGP how lessons from the audit could inform the education and training of GPs, including through continuous professional development and appraisal. The audit could also assist in the development of decision aids to support healthcare professionals in assessing symptoms and making decisions about further investigation or referral.”
Evolution

- Royal College of General Practitioners asked by National Cancer Director to take the lead on a National Audit of Cancer Diagnosis in Primary Care
- Audit discussed at an NCRI workshop on delays to diagnosis of cancer in primary care in December 2007
- Group of academics express interest in taking this forward on behalf of the RCGP
- Agreement to this by Chair of RCGP
- Initial clarification of scope of audit in May 2008
- Formation of a broadly based steering group
Priorities for action

• To gain a better understanding of the period between first presentation to primary care and referral to a specialist
  • A database analysis of patients with selected cancers and matched controls
  • Development of a standardised audit tool for use at practice level
• To gain in-depth insights into the primary care diagnostic process
Database analysis

• Baseline Study
  • Using General Practice Research Database
  • Methods for database search and analysis formulated
    • Initial difficulties with identifying salient events appear to have been overcome
  • Benchmark of current practice plus comparison of 2001/2 with 2007/8
  • Seek to demonstrate effect of symptom duration on outcomes
  • Results from late 2010
In depth study of the diagnostic process

- Makes use of significant event audit (a quality improvement approach in general use by practices)
- Detailed proposal developed to undertake in-depth qualitative analysis of SEAs for cancer diagnosis
- Analysis of large number of SEAs allows recurring themes to emerge
- In 2008/9 the focus was on lung cancer and on cancer in adolescents and young people
- In 2009/10 we are focusing on ovary and upper GI cancer
Standardised Audit Template

- Pilot audits of pathways to cancer diagnosis in Scotland and Manchester in 2006, Lambeth (London) and Bristol in 2007
- Initially focussed on compliance with 2-week referral rule
- Funding provided to practices for participation
Method of referral by GP Practice

0% 20% 40% 60% 80% 100%

Routine
Soon
Urgent
Emergency
Benefits arising from pilot audits

At practice level

• Dozens of mini significant event analyses
• Allows GP practices to benchmark referral rates against others
• Education from Macmillan Lead Cancer GPs tailored to report

At Health Board level

• Allowed much clearer picture of referral patterns
• Helped with service redesign
• Helped Lead GPs to be able to focus on areas of greatest need with the evidence to back this up
• Allowed comparison with previous years

Courtesy of Bill O’Neill, Cancer Lead NHS Lothian
RCGP-NCAT Audit tool

• Development team formed:
  – Clinical leads – Cathy Burton, Petula Chatterjee, Alison Wint
  – National leads – Ian Watson, Rosie Loftus
  – Academics – Willie Hamilton, Richard Neal

• Standardised tool developed from existing pilots over late 2008 / early 2009

• Feedback on draft version at NDP meeting in March 2009

• Pilot testing March 2009

• Implementation through LAEDI 2009/10

• November 2010 - Refinement of audit tool informed by user experience and process of analysis.
Content of RCGP – NCAT
Cancer diagnosis audit tool

• Demographic data (including ethnicity and country of birth)
• Difficulty with communication or leaving the house
• Diagnosis and stage
• Intervals from *time symptoms first noticed* to *first presentation* to referral to *being seen by a specialist*
• Presenting symptom
• Number of GP attendances
• Investigations done by GP
• Type of referral
Content of RCGP – NCAT cancer diagnosis audit tool

• Free text questions
  • Would rapid access to investigations have changed management?
  • What investigation would be most useful?
• Where there any avoidable delays – if so, what were they?

Supporting instructions on completion, plus drop-down menus in spreadsheet
• Supporting contractual agreement
Why have a national audit?

• Consistency across whole country allows comparison between areas
• Possible to identify patterns of care associated with less good outcomes
• Aggregation of data allows study of uncommon cancers and rare events
National Audit programme: supporting infrastructure

- Co-ordinated from Durham University on behalf of the RCGP
- Base recently moved to Clinical Innovation and Research Centre at RCGP
- Oversight group
- Working parties convened for standardised audit tool and for data analysis
- Data analysis support from NCIN for aggregated data at national level
Changes in Version 2

Out
• Date of first symptom
• Delay in informing practice of diagnosis

In
• Patient identifiable data
  – date of birth
  – NHS number
• Practice ID
• Date of diagnosis
• Co-morbidities(?)
Support

Advice on implementation of audit
Form of agreement with participant practices
Revised template

http://www.dur.ac.uk/school.health/erdu/cancer_audit/