# Impact of NPCA

NPCA
National Prostate Cancer Audit

HQIP
Healthcare Quality Improvement Partnership

Improvement goals supported by the NPCA can be found here.

## NATIONAL

**Evidence of national improvements in the quality and outcomes of care**

Several indicators were reported in the annual report for the pre-pandemic period (1 Apr 2019-31 Mar 2020) **for England and Wales:**

The proportion of men presenting with **metastatic disease** at diagnosis was stable at 13%.
As was the proportion of men **readmitted as an emergency** within 90 days of treatment at 13%.

Within 2 years of treatment, the proportion of men experiencing a severe **genitourinary complication** after radical prostatectomy was down to 7% and for a **gastrointestinal complication** after external beam radiotherapy it was 11%.

A new rapid dataset was used for the annual report for England. The data compare well with fully processed cancer registry data.

The rapid dataset does not allow for the usual risk stratification, so some indicators were reported **for Wales alone**:

The potential **'under-treatment'** of men: 40% of men with high-risk/locally advanced prostate cancer did not receive radical treatment (compared to 34% in Wales 2018-19).

The potential **'over-treatment'** of men with low-risk prostate cancer is stable at 10% (compared to 16% in Wales in 2019)

The availability of the rapid dataset allowed the reporting of the impact of COVID-19 in 2020 in England:

From April-June 2020:
- 54% reduction in diagnoses
- 48% reduction in RPs
- 45% reduction in RT

Since April 2020, a higher proportion of men have been diagnosed at stage IV

After June 2020
- RT recovered above 2019 levels July-Sept 2020
- Increased use of hypofractionation
- Rise in enzalutamide, fall in docetaxel use

## SYSTEM

**How the project supports policy development & management of the system**

NPCA results are published in peer reviewed publications, and presented at national (BAUS, BUG, BAUN, BAUS Oncology) and international conferences (EAU, ESTRO, AUA).

The findings from the NPCA have contributed to the NICE review and recent update of recommendations on using a 5-Tier, rather than 3-Tier, prostate cancer risk stratification (published in December 2021).

Key peer reviewed publications since June 2021 include:
- Impact of COVID-19 on the diagnosis and treatment of men with prostate cancer Jan 2022
- Urinary incontinence and the utilisation of incontinence surgery after radical prostatectomy Nov 2021
- Hospital volume and outcomes after radical prostatectomy Sept 2021
- Determinants of variation in radical local treatment for men with high-risk localised or locally advanced prostate cancer in England Sept 2021

All publications are announced on the NPCA website and on Twitter

A presentation has been made to the NCAPOP Health Inequalities workshop on the potential under-treatment of patients with locally advanced/high risk prostate cancer.

Individual trust results from the NPCA Annual Reports are available on data.gov.uk.

The NPCA team contributed to the development of the NICE Impact Report for prostate cancer.

The NPCA published a report comparing the Rapid Cancer Registry Data, which is available sooner after diagnosis, to fully processed registry data, and evaluating the utilisation of it for reporting NPCA indicators. It might be suitable for more frequent reporting.

## LOCAL

**How the project stimulates quality improvement**

Resources are published on the NPCA website to support local Quality Improvement (QI; action plan templates, provider-level reports and slides sets, case studies).

There has been no outlier process this year due to the new data source. As well as comprehensive results at provider level for England and Wales on the NPCA website, Trusts have been provided with their own data on request to support local Quality Improvement.

Organisational survey completed in autumn 2021 with 93% response rate:

Provider-level results published on website highlighting gaps in provision, particularly of allied services

When asked what services they had *on site* Trusts reported:
- 83% have a **CNS** in all clinics
- 78% provide **continence** services
- 73% have a **sexual function** clinic
- 67% offer **psychological** counselling
- 45% run **joint clinics**
- 29% provide **genetic** counselling
- 11% have an **onco-geriatric service**

NPCA Quality Improvement workshop on **The Impact of COVID-19** and **The Determinants of Variation in Treatment**
- Introduced by Stephen Fry; attended by ~100 clinicians and other MDT members, and patient representatives
- Presentations and panel discussions from a range of experts
- Videos of the event, including a full interview with Stephen Fry are at https://www.npca.org.uk/quality-improvement/

## PUBLIC

**How the project is used by the public and the demand for it**

Information regarding the provision of key diagnostic, treatment and support services by provider in England and Wales are available on the **NPCA website**. These results are utilised by **Prostate Cancer UK (PCUK)** and **Tackle Prostate Cancer** to inform patients regarding the availability of services.

Results from the NPCA reports receive national media coverage and are disseminated within stakeholder networks.

The **NPCA PPI Forum** met virtually in March 2022 with the NPCA research and clinical team:

Two PPI Forum members have agreed to co-develop a paper on allied services (such as sexual function clinics) based on the NPCA Organisational Survey.

PPI Forum members attended the NPCA QI event in December 2021 and provided their feedback during interviews with the NPCA team.

Two PPI Forum members are co-authors on a paper on patient reported experience measures

PPI Forum members guided the development of the Annual Report 2021 Patient Summary and accompanying slide set

All members of the PPI Forum have been asked for comments on current work on the impact of COVID-19

The Patient Summary of AR2021 and slide set are available from the NPCA website for use by patient groups

The NPCA supported NHS England and PCUK's campaign to "Find the 14,000 missing men"