



**NATCAN**

National Cancer Audit  
Collaborating Centre

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# Annual Report 2025





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**Citation for this document:**

National Cancer Audit Collaborating Centre:  
Annual Report, December 2025.  
London: Royal College of Surgeons of England.



Royal College  
of Surgeons  
of England

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The National Cancer Audit Collaborating Centre ([NATCAN](#)) is commissioned by the [Healthcare Quality Improvement Partnership \(HQIP\)](#) and funded by NHS England and Welsh Government as part of the National Clinical Audit and Patient Outcomes Programme ([NCAPOP](#)). NATCAN delivers national audits in bowel, breast (primary and metastatic), kidney, lung, non-Hodgkin lymphoma, oesophago-gastric, ovarian, pancreatic and prostate cancers.

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The past 12 months represent another sustained period of development and impact for the National Cancer Audit Collaborating Centre (NATCAN). The results from across all ten national cancer audits have identified common themes that should continue to be the focus of quality improvement (QI). These include variation in access to evidence-based care, with older patients at some hospitals having quite significant care deficits.

We also note that the outcomes (adverse events, survival) of treatment, be it surgery, radiotherapy, or systemic anti-cancer therapy, are variable across hospitals, and that the translation of learning from better-performing NHS Organisations would improve the quality of care.

I am pleased to see that NATCAN outputs are starting to have greater traction with the clinical and policy community as well as the wider public. We have had excellent attendance at our [national webinars](#) reporting the key results from the State of the Nation reports and making recommendations for delivering change locally, which has facilitated the exchange of ideas and activities between clinical and management teams.

This has been amplified by our ongoing relationship with the Royal College of Surgeons of England, who have engaged with their wide membership and co-hosted QI initiatives, as well as with the Royal College of Radiologists, who have hosted [two webinars](#) highlighting the results from the audits, as well as providing a practical perspective on how to navigate and use NATCAN data. In addition, there has been [high-profile media coverage](#) of the outputs from the audits supporting the recognition of quality as a major priority area in the NHS, which we hope is recognised in the new NHS Cancer Plan.

More broadly, NATCAN continues to strive to be world-leading in what we do and [remains unique](#) when compared to other international audit and quality registries. For example, [NATCAN's QI programme](#) is launching interventions across each of the ten cancer audits starting in Q4, specifically designed to deliver impact from the data we publish. We have been supported in this work by Robbie Foy, Sarah Alderson, and Michael Sykes, who are international experts in health system and service change from audit reporting.

Our website has been redeveloped to facilitate navigation to all our audit and quality improvement materials. NATCAN reports are accessible and enable NHS organisations and Cancer Alliances to look at their performance individually and across regions. The [data dashboards](#) have also evolved to provide more information and make it easier for users to establish how changes/improvements are occurring over time.

We are aware that a major local challenge at individual hospitals is for clinicians to have the time and the resources to digest the results from the national cancer audits and those from other initiatives – with a view to assessing and optimising pathways of care. To facilitate this, the Royal College of Radiologists has created a national [Data Leads and Implementation Network](#), with a defined recommendation that a consultant within each cancer centre is specifically job-planned to drive local quality improvement in cancer centres.

We are also collaborating with the THIS Institute at the University of Cambridge and the London School of Hygiene and Tropical Medicine on the [TACTIC study](#), which focuses on improving curative treatment waiting times for four major cancers. This innovative study seeks to create a cancer learning system that harnesses the power of audit data by creating online professional cancer communities, with the aim of identifying problems in processes of care and, importantly, of co-designing solutions that are implementable across NHS hospitals. We intend for the lessons from this study to be translated across the wider audit programme.

The NATCAN team works hard to ensure our outputs continue to be robust and to use innovative approaches. For example, we are currently [translating work](#) led by our methodological leads on identifying cancer recurrence within the national datasets to other tumour types. We are also developing methods to identify high-performing hospitals, given the differences in the types of patients served and services offered at different hospitals. In doing so, we will support learning and translation of the best care processes across hospitals to drive improvement at scale. In addition, we are collaborating with international quality registries with the aim of establishing a consensus approach to defining performance targets, which will support our QI activity across the audits.

Finally, we remain committed to the lived experience of people affected by cancer informing all of our activities. I am delighted that NATCAN has a PPI Forum for each audit, and is also now developing an overarching PPI Network for NATCAN itself. This is a core component of the culture within NATCAN: that we respond and implement change to improve the lives of patients receiving NHS care.

As always, on behalf of NATCAN, I thank the continued hard work and commitment of our staff and partners, and we look forward to an exciting 12 months ahead.



Ajay Aggarwal, NATCAN Clinical Director

Welcome to the third annual progress report from NATCAN, the home for all ten national cancer audits in England and Wales. This report presents the key achievements from 2024/25 and reflects on our continued efforts to deliver timely, consistent insights into cancer care, highlighting both areas of excellence and opportunities for improvement.

Highlights from the previous 12 months include:

## **Ensuring people with lived experience of cancer are at the heart of our work**

- We worked with our dedicated PPI Forums for each audit to ensure our activities and outputs are relevant from a patient perspective and our outputs are accessible.
- We are setting up a NATCAN-wide PPI Network, led by each PPI Forum Chair, to facilitate cross-audit collaboration on key themes and further amplify our PPI activities.

*For more information, see pages 6–7.*

## **Embedding quality improvement (QI) across our work**

- We developed QI interventions to address key clinical and/or data performance gaps for each audit, a key innovation predominantly based on an enhanced, active audit and feedback design.
- We are working with stakeholders to identify opportunities to amplify the impact of the planned QI projects, which are being launched from Q4 in 2025.

*For more information, see pages 8–9.*

## **Providing timely access to audit data**

- We launched quarterly data dashboards for every audit, providing timely reporting of data quality and clinical performance indicators, which allows providers in England to track the progress of local QI activities.
- We consulted with a range of stakeholders to understand their needs, which has shaped the ongoing, iterative development of the dashboards and accompanying downloadable reports.

*For more information, see page 10.*

## **Improving engagement to drive improvements in care and outcomes**

- We worked with a broad range of users to redesign the NATCAN website, the hub for all ten national cancer audits, providing easier access to our findings and resources (including the interactive data dashboards).
- We published the latest State of the Nation reports, highlighting both progress and areas where further improvement is needed, and working with myriad stakeholders to develop actionable recommendations.
- We hosted and actively participated in a range of in-person and virtual meetings, events, and conferences to help drive QI at both a national and local level.
- We reflected on the positive impact of the established audits in bowel, lung, oesophago-gastric, and prostate cancer, illustrated by improvements in key outcomes over time.

*For more information, see pages 2–3.*

## **Securing a two-year contract extension**

- We successfully applied for, and were awarded, a contract extension, building on the strong foundations laid since our establishment in October 2022.
- We will continue to successfully deliver national cancer audits through to October 2027.

*For more information, see page 25.*

We are grateful to all our partners, including professional bodies, clinical teams, data providers, patient representatives, and people with lived experience of cancer, with whom we collaborate. Also, our funders, NHS England and the Welsh Government, and our commissioner, HQIP, for their support. Together, we will continue to drive improvements in cancer care and outcomes in England and Wales.

# Highlights from 2024/25

“We are absolutely delighted that funding for NATCAN has been extended for a further two years. This continued support is a testament to the vital role our work plays in improving cancer care across England and Wales, reflecting the hard work and dedication of our multidisciplinary national audit teams who contribute their time, expertise, and passion. I would like to extend my heartfelt thanks to our audit teams and our clinical, academic, professional, and civil society partners, including people with lived experience of cancer, who inform all of our work. We look forward to building on our achievements and working together to deliver high-quality, impactful audits that drive meaningful change in cancer care.”

**Julie Nossiter**, NATCAN Director of Operations



**Julie Nossiter**, NATCAN Director of Operations

“It has been great to see NATCAN continue to build on the strengths and successes of the previous early years. The new initiatives launched this year, including the enhanced data dashboards and the roll-out of each audit’s QI intervention, are providing health services with the accurate and reliable resources that I have no doubt will be used to improve care and outcomes for patients.”

**Neil Mortensen**, Chair, NATCAN Board

The following page highlights a standout achievement from each audit over the past year. Additional accomplishments are detailed on pages 14–23.



# Key highlights

## National Bowel Cancer Audit (NBOCA)

Launching the 'Close It Quick' ileostomy closure quality improvement (QI) collaborative with RCS England

## National Audit of Metastatic Breast Cancer (NAoMe)

Presenting the NAoMe QI intervention and engaging with delegates at the Brighton Breast Conference (5th September 2025)

## National Audit of Primary Breast Cancer (NAoPri)

Facilitating engagement with the clinical community at the Association of Breast Surgery (ABS) conference, including hosting a stand and delivering multiple oral and poster presentations

## National Kidney Cancer Audit (NKCA)

Supporting the development of the first National Institute of Health and Care Excellence (NICE) kidney cancer guidelines and quality standards

## National Lung Cancer Audit (NLCA)

Publishing a 'Questions to ask Healthcare Professionals' document to support patients following a lung cancer diagnosis

## National Non-Hodgkin Lymphoma Audit (NNLHA)

Partnering with the National Disease Registration Service (NDRS) and the British Society of Haematology (BSH), to launch the NNHLA QI Intervention

## National Oesophago-Gastric Cancer Audit (NOGCA)

Presenting audit results during the National Oesophago-Gastric Cancer Pathway Day 2025, stimulating discussion of approaches to ensure more patients remain eligible for curative-intent surgery

## National Ovarian Cancer Audit (NOCA)

Co-hosting webinars with the British Gynaecological Cancer Society (BGCS), ensuring the ovarian cancer clinical community is involved and engaged in the Audit's activities

## National Pancreatic Cancer Audit (NPaCA)

Engaging with clinical communities on State of the Nation findings and QI work, including the annual Association of Upper Gastrointestinal Surgery of Great Britain and Ireland conference and webinars hosted by the Royal College of Radiologists

## National Prostate Cancer Audit (NPCA)

Launching the results of the NPCA State of the Nation report at a Parliamentary Reception convened by Prostate Cancer UK



# Spotlight on our PPI work

People with lived experience of cancer are at the heart of NATCAN’s work. Ensuring patient voices are represented in all aspects of what we do – from audit design through to dissemination of results and recommendations – is one of our core guiding principles. In 2025, we have continued to build on the work of previous years to ensure NATCAN’s outputs meet patient needs.

## PPI Forums: shaping and guiding our work

Each audit has a dedicated Patient and Public Involvement (PPI) Forum, whose members play an essential role in shaping our projects, ensuring our work is relevant from a patient perspective and our outputs are accessible to a public audience. Key activities carried out by PPI Forum members this year include:

- Advising on the language used in the patient and public versions of each audit’s annual State of the Nation report
- Undertaking an advisory role in the development of the new NATCAN website to ensure that patients and the public can easily find relevant information
- Presenting at a range of online and in-person events, providing a vital patient view (see below for an example)
- Raising awareness of our work in both patient and clinical communities by contributing to newsletters and social media output

You can read more about this important work in the individual audit updates on pages 14–23.

## Supporting quality improvement initiatives

In April 2025, NATCAN held its second in-person quality improvement event (for full details, see page 9). Duncan Edmonstone, Chair of the National Lung Cancer Audit (NLCA) PPI Forum and a stage 4 lung cancer patient, was one of the PPI representatives in attendance.

“I was pleased to be invited to take part in the NATCAN QI event and to hear from the teams how they could make real-world differences to patient outcomes by using the data collected in the various cancer audits. The actions outlined by the audits aim to improve data quality and completeness, improve specific metrics, and drive real-world improvements in outcomes for patients. It was great to see teams from across NATCAN present so many innovative approaches to driving actions in these categories, and I look forward to seeing this reflected in the audit metrics in the coming years.”

Duncan Edmonstone, Chair, NLCA PPI Forum



Duncan Edmonstone, Chair, NLCA PPI Forum

## Contributing to National Patient Data Day

NATCAN was delighted to be invited to contribute to the inaugural [National Patient Data Day](#) conference, hosted in Leeds by the organisation use MY data. Members of the team attended the event to showcase NATCAN’s work and reach new audiences. With around 250 delegates, the event brought together a wide range of stakeholders with a shared interest in using patient data to improve patient care and outcomes.



# Spotlight on our PPI work

“While representing NATCAN at the [use MY data](#) event, I was fortunate to meet several patient representatives who shared with me their personal stories of how their lives had been greatly impacted by cancer. This was a reminder to me of the important responsibilities that we have at NATCAN: supporting NHS Trusts to deliver the best possible standards of care, to contribute towards a healthier and more equitable society.”

**Vikki Hart**, Senior Project Manager, National Pancreatic Cancer Audit (NPaCA) and National Non-Hodgkin Lymphoma Audit (NNHLA)

“We don’t use names or NHS numbers. But every number in our data represents a person – a life, a family, a story. And we have a responsibility to use that information with purpose, to make care better, fairer, and faster for everyone.”

**Olivia Connor**, National Oesophago-Gastric Audit (NOGCA) Clinical Fellow, speaking at the ‘Soapbox Competition’ at the inaugural National Patient Data Day conference



Vikki Hart and Olivia O'Connor representing NATCAN at the 2025 National Patient Data Day conference

## Establishing a NATCAN-wide PPI Network

Work is under way to set up a NATCAN-wide PPI Network to further amplify our patient and public involvement activities. The PPI Network will bring together the experience within the individual audit PPI Forums into one collaborative space, with the aim of promoting cross-audit working and increasing the capacity for engagement with NATCAN-wide learning and other projects. This work is being led by the PPI Forum chairs, ensuring the voice of people with lived experience of cancer is the driving force behind the new Network.

“I am excited to see NATCAN entering a new chapter in forming a new NATCAN-wide PPI Network, which brings representatives from all of the audit PPI Forums together into one new and exciting space. The Network will be invaluable in helping to facilitate collaborative working and the sharing of good practice between audits, and in supporting new work on the horizon for NATCAN. I am looking forward to seeing what possibilities arise because of this important new initiative.”

**Lesley Goodburn**, Chair, NPaCA PPI Forum



Lesley Goodburn, Chair, NPaCA PPI Forum



# Spotlight on our QI work

Quality improvement (QI) is central to NATCAN's mission to support NHS health services to deliver consistently high-quality, equitable care for people with cancer. We define QI as the systematic use of methods and tools to improve the quality of care for patients on an ongoing basis, rather than as a one-off activity, recognising that sustainable improvement depends on an iterative cycle of measurement, reflection, intervention, and learning. Our QI programme is designed as a continuous data-driven process aimed at reducing unwarranted variation, improving outcomes, and supporting the implementation of evidence-based practice. By linking audit data with practical tools, clinical leadership, and patient involvement, we are fostering a sustainable culture of improvement that prioritises learning, transparency, and equitable care for all patients, contributing to the wider national effort to improve cancer outcomes.

## Embedding a QI-focused infrastructure

This year, NATCAN has built on the work undertaken in previous years to embed QI into our audit processes. In 2024, each audit published ten performance indicators to monitor progress towards the project's QI goals, which are aligned to national standards of care and were co-developed with a broad range of stakeholders. In January 2025, we launched new interactive dashboards with quarterly reporting of data, allowing the performance of cancer services to be seen at national, regional, and provider levels. This enables the timely identification of both high performance and areas for targeted improvement (see page 10 for more detail).

## Establishing a QI Working Group

In September 2025, we established a QI Working Group led by Ajay Aggarwal, NATCAN Clinical Director, bringing together QI expertise from across the centre, including senior methodologists, clinical leads, and a dedicated QI Clinical Fellow. This multidisciplinary, collaborative group identifies opportunities to develop learning and support delivery of QI across the cancer audits. To support a unified approach to, and understanding of, QI across NATCAN, this group developed an internal QI guidance document to support the design and delivery of each audit's QI intervention.

## Supporting local implementation

NATCAN has continued to support providers to take ownership of improvement by developing [practical tools](#) such as local action plan templates, root cause analysis guidance, and libraries of evidence-based interventions that help services respond to audit findings. You can find details of audit-specific activities in this area in the individual audit pages (pages 14–23).

## Education and capability building

We have further invested in the NATCAN team's QI expertise this year. Members of the audit teams leading the development of their respective QI interventions participated in formal QI training through programmes such as the [Investigating Quality and Safety and Intervention Design \(IQID\) course](#) at Oxford University. All audit team members have received access to QI education through a range of initiatives.



NATCAN team members attending the Investigating Quality and Safety and Intervention Design course



# Spotlight on our QI work

## 2025 QI event

We hosted our annual QI event in April this year, bringing together audit teams, professional bodies, and patient representatives to share good practice and lessons learned. This event focused on supporting the audits in the development of their first QI interventions, with several useful takeaways that were used to enhance their effectiveness. The attendees included Michael Sykes, a QI expert with vast experience in enhancing organisational responses to audit and feedback, while the panellists included representatives from NHS England, the National Data Registration service (NDRS), Cancer Alliances, and Macmillan.



Panellists and delegates at NATCAN's 2025 QI event

## Engaging with external experts

In January 2025, we held a brainstorming session to guide the development of audit QI interventions, and also held QI drop-in masterclasses over the summer. These learning forums were led by QI experts Robbie Foy, Sarah Alderson, and Michael Sykes and allowed the audit teams to discuss progress, challenges, and innovation opportunities, fostering cross-team learning and helping to build a collective improvement culture.

“Implementation scientists such as myself, Sarah from the University of Leeds, and Michael from Northumbria University have been working with the ten NATCAN cancer audit programmes to identify evidence-based ways of improving the impact of feedback on service delivery and patient outcomes. A range of key strengths were recognised, such as ensuring the credibility of audit data and focusing feedback on clinical recommendations with greatest scope for improvement. Over a series of workshops, the cancer audits developed a range of approaches to strengthen their impacts, such as specifying action plans for change, involving local champions, and facilitating engagement with feedback.”

Robbie Foy, University of Leeds

## Moving from planning to implementation

Starting in autumn 2025, each audit is beginning to roll out its defined QI interventions, marking the transition from audit reporting towards more active feedback and driving improvement. You can find more details in the individual audit pages (pages 14–23).

This transition is reflected within NATCAN itself. Building on our strong foundation of data analysis and stakeholder engagement, we will continue to embed QI across our work within NATCAN, implement targeted interventions to address identified performance gaps, and evaluate their impact through continuous measurement and review.

Providing timely access to audit data, in ways that support benchmarking, quality improvement initiatives, and transparency, is integral to NATCAN's work. A core activity is therefore the quarterly publication of [interactive data dashboards](#) of each audit's performance indicators and data quality for English NHS organisations, using the Rapid Cancer Registration Dataset (RCRD) to reduce the reporting lag to around six months. We have made significant strides in this important work throughout 2025. Since April this year, all ten audits have been publishing quarterly data dashboards, with functionality being added with each iteration. In September 2025, State of the Nation results were added to the dashboards. These are updated annually and allow benchmarking of NHS Trusts across England and Health Boards in Wales.

## Development timeline

- **April 2024:** NLCA launches first interactive quarterly data dashboard
- **October 2024:** NNHLA begins reporting via quarterly dashboard
- **January 2025:** All audits except National Prostate Cancer Audit (NPCA) publishing via quarterly dashboard
- **March 2025:** User survey conducted
- **April 2025:** All ten audits publishing via quarterly dashboard
- **July/August 2025:** Focus groups held to inform functionality development
- **September 2025:** Annual State of the Nation results by NHS provider added to dashboards

## Stakeholder input

For the data dashboards to have the greatest impact on improving patient care, they need to work for those who require access to the data. Throughout 2025, we have worked closely with a range of stakeholders to understand their requirements and determine how best to meet them. Following a user survey in March, which asked current and potential users about their awareness, use, and desired enhancements, we held focus groups in July and August with a diverse range of representatives at Trust, Cancer Alliance, and national levels – including clinical leads, patient and public involvement (PPI) representatives, and leads for cancer data, operations, and improvement. Our subsequent work to develop the dashboards – focusing on navigation, enhancing explanatory guidance, and providing more opportunities for benchmarking against peers – has been driven by this wide-ranging stakeholder input.

## Enhancing functionality

Based on user feedback, we have added new functionality each quarter. Highlights include:

- Customised data download added, with users able to download all results, Trust-level results, Cancer Alliance level results, and more
- Results from Trusts within the same Cancer Alliance highlighted
- Navigation improved, including reducing the number of clicks needed to access results and adding the ability to search for the name of a healthcare organisation
- Additional contextual information added, with the creation of a user guide about the indicators and methods written in lay language

## Future priorities

Looking ahead, we have identified a number of priority areas for future development including:

- Adding other types of indicator, such as times to treatment
- Reporting by patient subgroups
- Providing data completeness information alongside each performance indicator
- Bringing data from all of the audits into the same dashboard

*"We think the dashboards are really good. They're such a step change from where we were two years ago in terms of accessing this information... they are super useful and super helpful, and our teams all benefit from this work."*

**Stephen Zwolinsky**, PMO and Benefits Realisation Lead Analyst, West Yorkshire and Harrogate Cancer Alliance

*"As a result [of the dashboards], the engagement I've had from clinical teams in the last year of doing this job has been remarkable because people genuinely want to engage and improve."*

**Jo Lowe**, Programme Manager – Treatment Variation, Surrey and Sussex Cancer Alliance

The core priority of NATCAN is to positively impact patient care, driving improvement in both care and outcomes. Communications and engagement activities represent an important aspect of this work, allowing us to reach a broad range of stakeholders. This year, NATCAN has continued to deliver high-quality and impactful communications at both a Centre and individual audit level, with a focus on encouraging engagement with the audit results, recommendations, and QI initiatives. You will find highlights for each individual audit on pages 14–23.

## New NATCAN website

In September 2025, we launched a [new NATCAN website](#) after consultation with a broad range of users to ensure the design and functionality meet stakeholder needs. The website acts as a central hub for all ten national cancer audits and hosts all NATCAN and audit content.

The new features include:

- A new design and improved navigation, providing easier access to the latest results – including data dashboards and reports
- An updated QI page providing information on how we're driving cancer care improvements through clear goals, audit QI plans, and a dedicated QI Working Group (see pp. 8–9 for more detail about our QI activities)
- New sections: Events, Working with Us, Our Impact, and Library

## Annual State of the Nation reports

These annual reports provide a concise overview of the care received by cancer patients across England and Wales, and each one includes [five key recommendations for NHS cancer services](#). A new addition for September 2025 was the publication of individual NHS Trust and Health Board results, as well as regional-level results, in the new NATCAN data dashboards (see page 10). This will support the benchmarking of results and the identification of unwarranted variation in care and outcomes.

Each audit considers the complexity of cancer care, understanding that each patient's plan must consider the stage of their cancer, their fitness level, and the likelihood of them responding to treatment. The reports are accompanied by a Patient and Public Report, an action plan template to support local QI projects, and a detailed description of the audit methodology. The audit teams follow

an outlier process to identify providers whose performance falls outside expected ranges on selected indicators and to guide local improvement.

“NATCAN has exceeded expectations; only three years into the contract, the Centre has been established as a centre of clinical, data science, methodological and epidemiological expertise. The data now available to everyone – no passwords required – on interactive dashboards across ten cancer audits supports the NHS to identify and address areas of variation in patient care. NATCAN has identified where evidence-based care was not being provided, that data collection needs to improve, and that for some cancers there is a significant amount of variation in patient care and outcomes between different NHS Trusts and Health Boards. NATCAN also found variation in how older patients were treated compared to younger people. All this data was already being collected by the NHS, and is now available for everyone to scrutinise at Trust/Health Board, regional, and national level.”

Caroline Rogers, Associate Director, HQIP

## Engagement events

NATCAN has held a number of engagement events this year, alongside work by individual audits to share their findings and launch their new QI interventions (see pages 14–23 for more information). In October 2025, we held a two-part webinar to share the results from the State of the Nation reports, alongside panel discussions exploring key findings and practical insights on how providers can drive local improvements in cancer care across England and Wales. You can watch the recordings and download the slides on our [website](#).

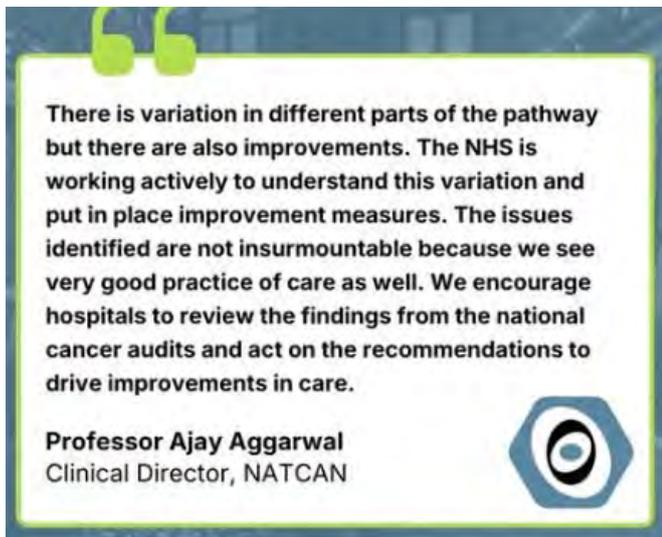
“The treatment you get, how quickly you get it, and how well you are supported is subject to far too much variation across England and Wales. NATCAN are doing an exceptionally thorough job of demonstrating that – it's our role as a clinical community to do something about it.”

Richard Simcock, Chief Medical Officer, Macmillan Cancer Support

Meanwhile, the Royal College of Radiologists hosted NATCAN audit lunchtime webinars in October and November 2025 for their members from the clinical oncology and radiology community. The webinars covered the work of NATCAN and the individual audits, the data dashboards, and how the audits can help drive quality improvement at a local level. The recordings are available on our [website](#).

## NATCAN in the spotlight

In February 2025, BBC News covered NATCAN's efforts in identifying variation in cancer care with an interview from Ajay Aggarwal, Clinical Director, NATCAN.



NATCAN coverage on BBC News

A [paper published in \*Lancet Oncology\*](#) focused on NATCAN and our work, comparing NATCAN and other international audit programmes, noting how other countries could consider and incorporate components of NATCAN, and suggesting scope for future development.

## Driving improvement over time

Our new website has a dedicated section highlighting the collective [impact of the audits](#) on patient outcomes. The long-term value is clear: the established audits in bowel, lung, OG, and prostate cancer show improvements across most performance indicators in the latest State of the Nation reports, wherever year-on-year data exist. In at least one nation improvements have been seen for 18 of 22 performance indicators (see the table on the next page).

The dashboards enable performance at both a national level and NHS provider level to be tracked over time. Variation between providers has reduced for many outlier-reported outcomes, such as 90-day mortality and unplanned return-to-theatre after bowel cancer surgery. Published outlier responses describe detailed action plans to improve care and data quality.

Where improvement at a national level and/or a reduction in variation between providers is required, we aim to address this via enhanced audit and feedback. For example, the recently launched NBOCA Close it Quick Quality Improvement (QI) Collaborative aims to improve the number of patients who have their ileostomy closed within 18 months of surgery for rectal cancer and how this varies from one provider to another in England and Wales (for further details, see page 14).

# Our impact

Table illustrating changes overtime for patient care and outcomes for the established audits in bowel, lung, oesophago-gastric (OG) and prostate cancer. Time periods were selected by the audits depending on the data available. Improvements have been seen for 18 of 22 performance indicators in the most recent State of the Nation Reports where results from previous years are available (Pale green = improvement in one nation/ one patient group; Dark green = improvement in both nations/ patient groups).

	Audit	Indicator	Time 1	National level time 1	Time 2	National level time 2
	NBOCA	Proportion of patients with stage 3 colon cancer receiving adjuvant chemotherapy	2015	58%	2021-23	66%
	NBOCA	Proportion of patients with unclosed ileostomy 18 months after anterior resection	2014-15	24%	2022-23	39%
	NBOCA	90-day postoperative mortality	2009-10	5.6%	2023	2.5%
	NBOCA	30-day postoperative unplanned return-to-theatre	2010-11	8.1%	2014-15	6.8%
	NBOCA	30-day postoperative unplanned readmission*	2010-11	10.0%	2023	11.8%
	NBOCA	2-year postoperative survival	2009-10	79.9%	2021-22	84.9%
	NLCA	Proportion of patients diagnosed with stage I/II	2019	30%(E) 28%(W)	2023	37%(E) 34%(W)
	NLCA	Proportion of patients with pathological diagnosis (PS 0–1)	2020	86%(E) 86%(W)	2023	84%(E) 94%(W)
	NLCA	Proportion of patients with NSCLC having curative treatment (Stage I/II, PS 0–2)	2019	81%(E) 74%(W)	2023	80%(E) 77%(W)
	NLCA	Proportion of patients NSCLC who had curative treatment (Stage IIIA, PS 0–2)	2019	57%(E) 56%(W)	2023	60%(E) 67%(W)
	NLCA	Proportion of patients with SCLC receiving chemotherapy	2019	69%(E) 65%(W)	2023	73%(E) 65%(W)
	NLCA	Proportion of patients NSCLC (Stage IIIB–IVB, PS 0–1) receiving SACT	2019	53%(E) 55%(W)	2023	62%(E) 55%(W)
	NOGCA	90-day postoperative mortality	2007-09	5.7% (Oesoph), 6.9% (Gastric)	2021-23	3.7% (Oesoph), 2.5% (Gastric)
	NOGCA	1-year postoperative survival	2017-20	82.7% (Oesoph), 85.6% (Gastric)	2021-23	84.1% (Oesoph), 84.3% (Gastric)
	NOGCA	≥15 lymph node examined	2007-09	69 - 79% (Oesoph), 74-75% (Gastric)**	2021-23	92% (Oesoph), 86% (Gastric)
	NOGCA	Positive longitudinal resection margin	2017-19	<4% (Oesoph), 8.1% (Gastric)	2019-22	4.9% (Oesoph), 9.8% (Gastric)
	NPCA	Proportion of patients diagnosed with metastatic disease	2017-18	16%	2022-23	12%(E) 20%(W)
	NPCA	Proportion of patients with low-risk localised disease having radical treatment	2017-18	4%	2022-23	7%
	NPCA	Proportion of patients with high-risk/locally advanced disease having radical treatment	2017-18	68%	2022-23	69%(E) 68%(W)
	NPCA	90 day emergency readmissions after radical surgery	2017-18	14%	2023-24	12%(E) 14%(W)
	NPCA	2-year genitourinary complications after radical prostatectomy	2016	9%	2021-22	6%(E) 11%(W)
	NPCA	2-year gastrointestinal complications after radical radiotherapy	2016	10%	2021-22	8%(E) 6%(W)

OG: Oesophago-gastric, E: England, W: Wales, Oesoph: Oesophageal

\* Coding of same-day admissions at surgical assessment units have affected recent results and updated coding guidelines are not yet reflected in the results shown \*\*depending on surgical approach

[NBOCA reports](#)

[NLCA reports](#)

[NOGCA reports](#)

[NPCA reports](#)

## About NBOCA

The National Bowel Cancer Audit (NBOCA) reports on the care of people diagnosed with bowel cancer in NHS hospitals in England and Wales, from diagnosis to end-of-life care. It focuses on improving:

- the diagnostic pathway
- perioperative care
- oncological care
- management of stage four disease
- end-of-life care

## 2024/25 highlights

### Driving quality improvement

The 2025 State of the Nation report identified that nearly two in five patients have an unclosed diverting ileostomy 18 months after anterior resection for bowel cancer. This has a negative effect on quality of life, and potentially also on long-term survival. In response, NBOCA, the Royal College of Surgeons of England, and the Association of Coloproctology of Great Britain & Ireland (ACPGBI) launched [Close It Quick](#), a quality improvement collaborative designed to optimise ileostomy closure rates.

### Engaging with professionals and patients

Nicola Fearnhead, NBOCA Surgery Lead, chaired a panel discussion at the ACPGBI Annual Meeting in June 2025 on Close It Quick. Key topics included the importance of shared decision-making and strategies to optimise the patient pathway, including virtual wards. Katrina Attwood, NBOCA Patient and Public Involvement Forum chair, represented the patient voice at the panel discussion and highlighted the wider impact on quality of life of unclosed ileostomy.

### Global collaboration

NBOCA is a founding member of the International Colorectal Cancer Outcomes Registry (ICORC), which uses data from international cancer registries to improve colorectal cancer care globally. In 2024, ICORC published a common dataset that aims to enable meaningful large-scale international outcomes research. In 2025, ICORC began building on this work by identifying key data items for new bowel cancer registries.



Nicola Fearnhead, NBOCA Surgery Lead, chairing the panel discussion on Close It Quick at the ACPGBI Annual Meeting

“One great thing about NBOCA is how the patient voice is embedded in all phases of the work. Patients are involved in the selection of audit performance indicators, and we get to see real-world impacts of that research when initiatives are pushed forward to address those indicators. I know first-hand how useful it is to have the NBOCA data to refer to in conversations with newly diagnosed patients, to help them understand what to expect.”

**Katrina Attwood**, Chair, NBOCA Patient and Public Involvement Forum

### Find out more about NBOCA

- 2025 State of the Nation report available [here](#)
- Quality Improvement Plan and information on the Performance Indicators available [here](#)
- Website: [www.natcan.org.uk/audits/bowel](http://www.natcan.org.uk/audits/bowel)

### Meet the NBOCA team

Information about the NBOCA project team, Clinical Advisory Group members, and Patient and Public Involvement Forum members is available [here](#).



NAoMe

National Audit of  
Metastatic Breast Cancer

## About NAOme

The National Audit of Metastatic Breast Cancer (NAoMe) evaluates metastatic breast cancer care delivered to women and men aged  $\geq 18$  in NHS hospitals across England and Wales. It covers the care pathway from first diagnosis of metastatic disease, whether from recurrent disease or a *de novo* diagnosis, and assesses short- and long-term outcomes following treatment. Key areas of focus are:

- improving the movement of patients through the care pathway
- reducing unwarranted variation in access to and timeliness of systemic anti-cancer treatment
- reducing unwarranted variation in access to and timeliness of palliative treatments
- improving access to nursing support
- improving and reducing variation in metastatic breast cancer outcomes

## 2024/25 highlights

### *Supporting improved recording of metastatic recurrence*

A key priority for NAOme is driving improvement in the recording of metastatic recurrence in core datasets. This year, NAOme has also established a dedicated Data Quality Working Group focused on recurrence, which has met twice to share learning and coordinate improvement efforts.

### *Targeted quality improvement intervention*

The NAOme QI intervention was launched in October 2025 and aims to improve the recording of distant recurrent disease. The project team will be engaging with NHS Trusts in England and the National Cancer Team in Wales, working collaboratively to improve data quality.

### *Global advocacy*

The NAOme team attended the [‘Count Us In’](#) event at the Australian High Commission in July 2025, joining breast cancer clinical leaders and advocates to discuss how to improve visibility for metastatic breast cancer. This important work contributed to our efforts to advance data collection and collaboration to better analyse and improve care for people with metastatic breast cancer.



Mark Verrill, Clinical Lead (Medical Oncology), presenting at the UK Breast Cancer Group Conference 2025

“To my knowledge, NAOme is the first ever national audit addressing patient needs, care, and outcomes in any form of metastatic cancer. Metastatic breast cancer is a common and heterogenous disease that presents a huge burden for patients, their families, and the healthcare system. Care and treatment algorithms are complex and multidisciplinary. Despite a wealth of evidence from clinical trials, there is limited information on the care that is provided across England and Wales, on outcomes for patients, and on how research evidence is implemented. NAOme presents a number of challenges, but the opportunities to understand, and try to improve, care and outcomes are of immense value.”

David Dodwell, NAOme Clinical Lead (Clinical Oncology)

## Find out more about NAOme

- 2025 State of the Nation report available [here](#)
- Quality Improvement Plan and information on the Performance Indicators available [here](#)
- Website: [www.natcan.org.uk/audits/metastatic-breast/](http://www.natcan.org.uk/audits/metastatic-breast/)

## Meet the NAOme team

Information about the NAOme project team is available [here](#).

## In memoriam: Jo Taylor, founder of METUPUK

We were deeply saddened to hear about the death of Jo Taylor, founder of METUPUK, in November 2025. Jo was a tireless advocate for people living with metastatic breast cancer, and we are grateful for her contributions as a member of the NAOme PPI Forum.



# NAoPri

National Audit of  
Primary Breast Cancer

## About NAOpri

The National Audit of Primary Breast Cancer (NAoPri) analyses primary breast cancer care delivered to women and men aged  $\geq 18$  in NHS hospitals across England and Wales. It covers the care pathway from first diagnosis of primary breast cancer to the end of the sequence of planned primary treatments subsequently received by these patients. NAOpri's key priorities are:

- improving the movement of patients through the care pathway
- reducing unwarranted variation for patients undergoing surgery
- reducing unwarranted variation for patients having non-surgical oncological treatments
- improving access to breast reconstruction after mastectomy
- reducing unwarranted variation in primary breast cancer outcomes

## 2024/25 highlights

### Disseminating key findings

A number of publications based on research undertaken by the NAOpri team are under review or in preparation. Abstracts related to these papers have published in the *European Journal of Surgical Oncology*, with topics including the impact of patient and clinical characteristics on the experience of care for breast cancer patients in England, the variation in rates of immediate breast reconstruction in England and Wales, and a population-based study of breast cancer in men in England and Wales.

### Participating in events

At the 2025 Association of Breast Surgery (ABS) Conference, NAOpri hosted a stand and made several oral and poster presentations. Engagement at the stand resulted in 80 new sign-ups to the Audit's communications list. The NAOpri team also gave a number of presentations at regional ABS events.

### Expanding reach and engagement

NAoPri has continued to build on its successful digital channels and broaden digital engagement with the launch of LinkedIn and Bluesky pages. The Audit also published a [Patient Guide to Quarterly Reports](#) to support members of the public to navigate the NAOpri data dashboards.



Members of the NAOpri team at the 2025 ABS Conference

"Having an exhibitor stand at the annual ABS conference was an amazing opportunity to engage members of multidisciplinary breast care teams in checking their own data on our data dashboards. For many, the improvement over time in performance or data quality seen on the dashboards during our demonstrations reflected efforts that had been made in the Trust, and was reassuringly positive news. For others, areas for improvement were identified that they could bring back to their Trust to consider."

Liyang Wang, NAOpri Clinical Fellow

## Find out more about NAOpri

- 2025 State of the Nation report available [here](#)
- Quality Improvement Plan and information on the Performance Indicators available [here](#)
- Website: [www.natcan.org.uk/audits/primary-breast/](http://www.natcan.org.uk/audits/primary-breast/)

## Meet the NAOpri team

Information about the NAOpri project team is available [here](#).

### About NKCA

The National Kidney Cancer Audit (NKCA) assesses kidney cancer care delivered in NHS hospitals across England and Wales where the patient had a recorded diagnosis of malignant neoplasm of kidney (except renal pelvis) and was  $\geq 18$  at diagnosis. The Audit focuses on:

- increasing regional equity in timely access to evidence-based care
- increasing the use of renal tumour biopsy
- expediting treatment for patients with localised renal cell cancer (RCC) at high risk of recurrence
- increasing use of surgery, if medically appropriate, for patients with RCC at high risk of progression
- increasing use of evidence-based systemic anticancer therapy (SACT) in eligible patients

### 2024/25 highlights

#### *Contributing to national guidance*

The NKCA team provided advice and assistance with data to the team developing the first National Institute of Health and Care Excellence (NICE) kidney cancer guidelines and quality standards. These guidance documents are due to be published in March 2026.

#### *Improving national data quality*

For the first time, the NKCA ran an outlier process for the performance indicator 'percentage of people presenting with M1 RCC who have initial SACT within 12 months of diagnosis'. This revealed inaccuracies in the data received by the NKCA from the Systemic Anti-Cancer Therapy (SACT) data; these were highlighted to Trusts, leading to the implementation of quality improvement measures for data submissions. This means that, in future, data from SACT is likely to be more accurate.

#### *Sharing findings with the clinical community*

The Audit team has presented findings from the 2025 State of the Nation report at a number of key clinical events. Amit Bahl, NKCA Clinical Lead (Oncology), presented at the British Association of Urological Surgeons (BAUS) Oncology Annual Meeting in

October. Meanwhile, Raghav Varma, NKCA Clinical Fellow, presented at the British Uro-oncology Group (BUG) Annual Meeting in September 2025, and also shared key findings with members of the Partial Clinical Trial Group related to the proportion of T1aN0M0 patients undergoing nephron-sparing treatment.



Raghav Varma, NKCA Clinical Fellow, presenting at the BUG Annual Meeting

"The NKCA recognises the importance of sharing its findings with the clinical community, and this year we were delighted to see strong engagement and enthusiasm for our work across national meetings. Members of the NKCA team presented at both the BUG and BAUS conferences, where our new data dashboard generated significant interest among clinicians. This growing engagement offers valuable opportunities to improve kidney cancer care by enabling clinicians, researchers, and policymakers to use national data insights to drive quality improvement across the UK."

Raghav Varma, NKCA Clinical Fellow

#### Find out more about NKCA

- 2025 State of the Nation report available [here](#)
- Quality Improvement Plan and information on the Performance Indicators available [here](#)
- Website: [www.natcan.org.uk/audits/kidney/](http://www.natcan.org.uk/audits/kidney/)

#### Meet the NKCA team

Information about the NKCA project team is available [here](#).

## About NLCA

The National Lung Cancer Audit (NLCA) evaluates the process of care, treatment delivered, and outcomes for lung cancer patients treated in secondary and tertiary care hospitals in England and Wales. The Audit's priorities are:

- increasing the proportion of patients who receive treatment with curative intent
- increasing the proportion of patients assessed by a lung cancer nurse specialist
- improving early diagnosis of lung cancer
- improving compliance with the timeframes set out in the National Optimal Lung Cancer Pathway
- reducing variation in quality and improving timeliness for patients undergoing predictive molecular marker analysis

## 2024/25 highlights

### Developing patient resources

With the help of the NLCA Patient and Public Involvement (PPI) Forum, the Audit produced two important resources for patients in 2025. [Questions to ask Healthcare Professionals](#) provides patients who have recently been diagnosed with lung cancer with a list of questions they may want to consider asking their medical team, while the [Patient Guide to Statistics](#) supports patients and members of the public in interpreting the Audit's reports and data dashboards.

### Engaging with healthcare professionals

The NLCA team has shared key findings from the 2025 State of the Nation report at a number of key clinical events. Neal Navani, NLCA Senior Clinical Lead, presented at the British Thoracic Oncology Group Conference 2025, where NLCA Clinical Fellow Lauren Dixon won first prize for an abstract about patterns of systematic anti-cancer therapy use in advanced stage non-small cell lung cancer in England. Doug West, NLCA Clinical Lead, and Lauren also presented at the 2025 Society of Cardiothoracic Surgery. Finally, the UK Lung Cancer Coalition published a blog post written by Lauren exploring key progress and challenges in lung cancer care in recent years.

### International impact

The NLCA has been working with colleagues in Australia to provide advice and insights from the Audit. This collaboration contributed to the development

of a new funded lung cancer data platform (Lung Cancer Clinical Quality Data Platform, or LUCAP). In addition, the NLCA team has contributed to work on understanding variation in lung cancer care in Australia and a consensus process to establish clinical quality indicators for thoracic cancer.



NLCA Clinical Fellow Lauren Dixon with her prize-winning abstract at the BTOG Conference 2025

"While the cancer audits are primarily a tool for healthcare professionals and managers, patients, patient advocates, and charities also take an interest. Providing plain-language guidance to these groups is critical to ensuring the audits are well understood and effectively used by laypersons."

Duncan Edmonstone, Chair, NLCA PPI Forum

## Find out more about NLCA

- 2025 State of the Nation report available [here](#)
- Quality Improvement Plan and information on the Performance Indicators available [here](#)
- Website: [www.natcan.org.uk/audits/lung/](http://www.natcan.org.uk/audits/lung/)

## Meet the NLCA team

Information about the NLCA project team and Clinical Reference Group is available [here](#).



# NNHLA

National Non-Hodgkin  
Lymphoma Audit

## About NNHLA

The National Non-Hodgkin Lymphoma Audit (NNHLA) reports on non-Hodgkin lymphoma (NHL) care delivered in NHS hospitals across England and Wales. The nature of NHL means the care pathway is personalised for each patient depending on the diagnosed subtype. Key priorities for the Audit are:

- improving timely diagnosis and treatment
- ensuring treatment is appropriate to the subtype of NHL
- improving the safety and reducing the toxicity of NHL therapy
- improving overall survival for people with NHL
- reducing variation in NHL management among NHS providers

## 2024/25 highlights

### Launching the NNHLA QI intervention

In October, the NNHLA launched its QI intervention at a webinar hosted by the British Society of Haematology and delivered in partnership with the National Disease Registration Service. The Audit's QI focus is improving data quality (particularly for staging), so this partnership with data partners and other key stakeholders will be significant in achieving the NNHLA's vision. Improving data completeness prevents important issues from remaining hidden and avoids missed opportunities to ensure better treatment and support.

### Sharing good practice

As part of the QI webinar, the NNHLA team presented case studies from Homerton University Hospital, a Trust with good data completeness around staging data. This was an opportunity to explore local QI initiatives and strategies to improve data quality with other attendees, sharing good practice with other organisations across the country.

### Presenting findings at key national meetings

Ruhi Kanani, NNHLA Clinical Fellow, and Kate Walker, NNHLA Senior Methodologist, represented the Audit at the British Society of Haematology's

65th Annual Scientific Meeting. Held in Glasgow in April, this event is one of the largest haematology meetings in the UK. Ruhi Kanani delivered a presentation showcasing the work of the NNHLA, while Kate Walker provided demonstrations of the audit's interactive data dashboards.



Kate Walker, NNHLA Senior Methodologist, at the British Society of Haematology's 65th Annual Scientific meeting.

"This year, we were very pleased to publish our first interactive State of the Nation Data Dashboard, which is an important tool to support NHS Trusts in being able to quickly benchmark their progress against the key performance indicators identified previously by the Audit team. A particularly helpful feature of the dashboard is a funnel plot graph, which provides a clear and straightforward visual for Trusts to see their performance against both other Trusts locally and nationally and against the national average."

Lu Han, Methodologist, NNHLA

### Find out more about NNHLA

- 2025 State of the Nation report available [here](#)
- Quality Improvement Plan and information on the Performance Indicators available [here](#)
- Website: [www.natcan.org.uk/audits/non-hodgkin-lymphoma/](http://www.natcan.org.uk/audits/non-hodgkin-lymphoma/)

### Meet the NNHLA team

Information about the NNHLA project team is available [here](#).



# NOGCA

National Oesophago-Gastric  
Cancer Audit

## About NOGCA

The National Oesophago-Gastric Cancer Audit (NOGCA) evaluates the care of patients with a histologically confirmed diagnosis of oesophageal or stomach cancer in England and Wales from diagnosis to the completion of primary treatment delivered in hospital settings. Its priorities are:

- to reduce rates of emergency and late-stage diagnosis of OG cancer
- to improve timely access to staging investigations to reduce delays between diagnostic endoscopy and the start of disease-targeted treatment
- to improve the completion and reduce the complications of palliative chemotherapy for people with OG cancer
- to increase the percentage of people with OG cancer who have access to a CNS
- to improve the [quality and consistency](#) of pathology data flows to enable robust national assessment and benchmarking of surgical performance

## 2024/25 highlights

### Engaging with Trusts to drive quality improvement

Trust-level data from NOGCA were presented at the South Yorkshire and Bassetlaw Cancer Alliance Clinical Delivery Group meeting in June 2025, showcasing the Audit's role in stimulating discussion and driving quality improvement. The Trusts identified areas requiring attention and shared practical solutions to strengthen data quality. The new interactive data dashboards were also shared at the meeting, with positive feedback about their clarity, accessibility, and value for local benchmarking.

### Strengthening the Audit's relevance

NOGCA data were presented at the AUGIS Annual Scientific Meeting 2025, generating constructive discussion among oesophagogastric surgeons about how the Audit can continue to support and inform clinical practice. Delegates emphasised the importance of maintaining engagement through meaningful indicators and timely feedback, and also shared ideas for future analyses and audit development. This open dialogue helps to ensure that NOGCA remains relevant, clinically useful, and aligned with the evolving needs of the surgical community.

### Using NOGCA data to improve pathways from diagnosis to treatment

At the National Oesophago-Gastric Cancer Pathway Day 2025, NOGCA presented new findings on variation in time from diagnosis to treatment across England. The presentation stimulated discussion on how to streamline staging and optimise coordination of care. This engagement reflects NOGCA's growing role in supporting national and local quality improvement initiatives aimed at ensuring more patients remain eligible for curative-intent surgery.



Olivia O'Connor, NOGCA Clinical Fellow, presenting at the AUGIS Annual Scientific Meeting 2025

“Through NOGCA, we’re using national data to understand where variation exists and to work collaboratively with clinicians to improve pathways of care. As clinicians, we see first-hand how delays can affect a patient’s chance of curative treatment. By reducing these delays and optimising treatment processes, we can help more patients reach surgery while still fit and operable, ultimately improving outcomes and survival.”

Olivia O'Connor, NOGCA Clinical Fellow

### Find out more about NOGCA

- 2025 State of the Nation report available [here](#)
- Quality Improvement Plan and information on the Performance Indicators available [here](#)
- Website: [www.natcan.org.uk/audits/oesophago-gastric/](http://www.natcan.org.uk/audits/oesophago-gastric/)

### Meet the NOGCA team

Information about the NOGCA project team and Clinical Reference Group is available [here](#).

### About NOCA

The National Ovarian Cancer Audit (NOCA) evaluates the diagnostic care pathway, treatments received, and clinical outcomes for patients diagnosed in NHS Trusts and Health Boards in England and Wales with ovarian cancer. Key priorities for the Audit are:

- increasing the proportion of patients with ovarian cancer receiving:
  - timely diagnosis and treatment decisions
  - molecular diagnostics
  - surgery
  - chemotherapy
- improving rates of and variation in survival for patients with ovarian cancer

### 2024/25 highlights

#### *Collaborating with professional organisations*

To date, NOCA has hosted three webinars in collaboration with the British Gynaecological Cancer Society (BGCS), ensuring the ovarian cancer clinical community is involved and engaged in the Audit's activities. The latest webinar, in May 2025, focused on the NOCA QI intervention launched in autumn 2025 and featured clinicians from Manchester University NHS Foundation Trust and Barts Health NHS Trust, who provided insight into their Trusts' results for the following performance indicator: 'Any treatment (surgery and/or chemotherapy) within 3 months for all women diagnosed with ovarian cancer who had an emergency hospital admission in the 28 days prior to diagnosis'.

#### *Advancing research in ovarian cancer*

Alongside its audit outputs, NOCA maintains a strong commitment to research. A key area of focus is the State of the Nation finding that 40% of ovarian cancer diagnoses are made following an emergency admission. Georgia Zachou, NOCA Clinical Fellow, presented findings on the determinants of being diagnosed following an emergency admission and the subsequent survival disadvantage these women face at the BGCS annual scientific meeting in July 2025.

#### *Disseminating key findings*

Agnieszka Michael, NOCA Clinical Lead (Medical Oncology), presented key findings from the second NOCA State of the Nation report at the BGCS

annual scientific meeting in July 2025. This included preliminary results related to the Audit's new performance indicator: 'Any treatment (surgery and/or chemotherapy) within 3 months for all women diagnosed with ovarian cancer who had an emergency hospital admission in the 28 days prior to diagnosis'.



Agnieszka Michael at the 2025 BGCS annual scientific meeting

"I was delighted to be asked to join the BGCS National Ovarian Cancer Audit webinar to talk about our ethos, experiences, and practices, which have contributed to our consistent outstanding results in NOCA. I knew it was essential that I spoke in conjunction with our Lead Gynae Medical Oncologist and our Lead for ovarian cancer surgery; our above average survival for women with ovarian cancer comes from a multidisciplinary effort. I'm sure shared leaning of best practice can help improve outcomes for women with gynaecological cancers around the UK."

**Elly Brockback**, Consultant Gynaecological Oncologist, Barts Health NHS Trust

#### Find out more about NOCA

- 2025 State of the Nation report available [here](#)
- Quality Improvement Plan and information on the Performance Indicators available [here](#)
- Website: [www.natcan.org.uk/audits/ovarian/](http://www.natcan.org.uk/audits/ovarian/)

#### Meet the NOCA team

Information about the NOCA project team is available [here](#).



# NPaCA

National Pancreatic  
Cancer Audit

## About NPaCA

The National Pancreatic Cancer Audit (NPaCA) evaluates the care of adults diagnosed with exocrine pancreatic cancer in NHS Trusts in England and Wales. NPaCA assesses pancreatic cancer care from first diagnosis to the end of primary treatment (including treatments with and without curative intent). The Audit focuses on:

- increasing the percentage of people who have diagnostic procedures and a process of diagnosis consistent with national recommendations for pancreatic cancer
- optimising diagnostic and treatment pathways to reduce the time between referral and the start of disease-targeted treatment
- increasing the percentage of people with pancreatic cancer (who are fit enough for treatment) who receive disease-targeted treatment
- increasing the percentage of people with pancreatic cancer who receive supportive care in line with national recommendations
- improving outcomes for people diagnosed with pancreatic cancer

## 2024/25 highlights

### Engaging with diverse audiences

NPaCA's work to engage patients and the public has continued, driven and supported by the NPaCA PPI Group and close relationship with Pancreatic Cancer UK. The latter continues to be a thought partner and champion of the audit, supporting the release of the 2025 State of the Nation report with a [blog post](#). Plans are under way to develop a short film about NPaCA for Cancer Alliances, focusing on a new QI initiative.

### Driving action 'on the ground'

NHS Trusts and Cancer Alliances have increased their engagement with NPaCA's interactive Data Dashboards over the last 12 months, with positive feedback about how the data generated by the Audit is leading to real changes in care. For example, one Cancer Alliance Clinical Chair uses the quarterly data generated by NPaCA as a key component within tailored progress reports sent to Trusts within the Cancer Alliance.

### Sharing progress with the clinical community

The NPaCA project team continues to share information at clinical meetings and conferences. Andrew Smith, NPaCA Co-Clinical Lead for Surgery, presented on the work of the Audit at the Annual Scientific Meeting of the Association of Upper Gastrointestinal Surgery of Great Britain and Ireland (AUGIS) in October as part of a hepato-pancreato-biliary plenary session. Delegates heard about the key findings from the 2025 State of the Nation report, as well as plans for a quality improvement intervention due to be launched by the end of 2025. Meanwhile, Ganesh Radhakrishna, Clinical Lead (Oncology), presented the Audit's findings at a series of webinars hosted by the Royal College of Radiologists.



Stewart Manning, NPaCA PPI Forum member

"As a member of NPaCA's PPI Forum, I have been pleased to share both my personal experience (having sadly lost my best friend to pancreatic cancer) and professional insight (as a retired GP) to the benefit of the work of the audit, as well as contributing to the development process for this year's PPI version of the State of the Nation report."

Stewart Manning, NPaCA PPI Forum member

### Find out more about NPaCA

- 2025 State of the Nation report available [here](#)
- Quality Improvement Plan and information on the Performance Indicators available [here](#)
- Website: [www.natcan.org.uk/audits/pancreatic/](http://www.natcan.org.uk/audits/pancreatic/)

### Meet the NPaCA team

Information about the NPaCA project team is available [here](#).

### About NPCA

The National Prostate Cancer Audit (NPCA) assesses prostate cancer care delivered to patients in NHS hospitals across England and Wales, considering both personal and tumour factors across the care pathway. Its core priorities are:

- improving timely diagnosis and treatment of patients with high-risk prostate cancer
- reducing potential over-treatment
- reducing potential under-treatment
- reducing short-term complications after radical prostate cancer surgery
- reducing medium-term complications after radical prostate cancer surgery and radiotherapy

### 2024/25 highlights

#### Engaging with policy-makers

Prostate Cancer UK, a key stakeholder for NPCA, held a parliamentary reception to launch the results of the 2025 NPCA State of the Nation report in October. MPs and members of the prostate cancer community attended the event. Noel Clarke, NPCA Clinical Lead (Surgery), was a member of the panel discussing the latest findings from the audit.

#### Supporting quality improvement

As a first step in the NPCA's QI intervention, the team ran the outlier process for the treatment intensification performance indicator. This revealed inaccuracies in the SACT data received by the NPCA, which were highlighted to Trusts. As a result, the Trusts implemented QI measures for data submissions, meaning future data from SACT is likely to be more accurate.

#### Disseminating findings

NPCA continues to share its findings with the clinical community via conferences and publications. Alison Tree, NPCA Clinical Lead (Oncology), presented unpublished findings from the State of the Nation report at the British Uro-oncology Group Annual Meeting in September, and Noel Clarke, NPCA Clinical Lead (Urology), presented the same at the British Association of Urological Surgeons Oncology Annual Meeting in October. Key publications include a paper in *BMJ Oncology* looking at geographic, socioeconomic, and demographic inequalities in the incidence of metastatic prostate cancer at time of

diagnosis, and a paper in the *European Journal of Cancer* exploring whether evidence-based guidelines are translating into clinical practice. Meanwhile, Ganesh Radhakrishna, Clinical Lead (Oncology), presented the Audit's findings at a series of webinars hosted by the Royal College of Radiologists.



The NPCA Project Team

"The NPCA continues to recognise the importance of translating high-quality national audit data into meaningful improvements in prostate cancer care. This year's State of the Nation report highlights both the progress achieved and the areas where variation persists. Alongside this, our QI initiative provides practical opportunities for clinical and administrative teams to share learning, discuss emerging evidence, and implement evidence-based practice, including through our recent BURST x NPCA collaborative webinar on 'The Use of Systemic Anti-Cancer Treatment in Metastatic Prostate Cancer'. These efforts strengthen our ability to improve outcomes, benchmark performance, and embed innovation across services."

Arjun Nathan, Clinical Fellow

#### Find out more about NPCA

- 2025 State of the Nation report available [here](#)
- Quality Improvement Plan and information on the Performance Indicators available [here](#)
- Website: [www.natcan.org.uk/audits/prostate/](http://www.natcan.org.uk/audits/prostate/)

#### Meet the NPCA team

Information about the NPCA project team and Clinical Reference Group is available [here](#).

We are delighted to have been awarded a two-year extension for NATCAN through to October 2027. The coming year will see us build on the strong foundations laid during our first three years, with a clear focus on ensuring audit outputs translate into meaningful improvements in cancer care. The overarching theme behind each activity is to achieve more effective dissemination of results from the audits; this will encourage insightful benchmarking of performance by services, commissioners, and policymakers and enable the sharing of lessons learned and the implementation of local quality improvement (QI) projects. We will work with our many stakeholders to ensure the national audits support clinical practice, national policy, and other QI initiatives in cancer.

## Disseminating our results

We will continue to evolve our reporting tools to make audit findings more accessible and actionable. The quarterly interactive dashboards for all ten audits will be enhanced with new features guided by the needs of users and improved visualisations to support local QI planning. A key addition will be a central dashboard enabling cross-audit comparisons, including downloadable reports. Alongside the dashboards, NATCAN will promote its programme of webinars and presentations at national and regional meetings, ensuring that results and recommendations reach clinicians, managers, and commissioners. These activities will be complemented by the redesigned NATCAN website, which now serves as a central hub for audit findings, QI resources, events, and educational materials.

## Engaging with clinical communities and PPI groups

Embedding the voice of people with lived experience of cancer remains a cornerstone of NATCAN's approach. In 2026, we will strengthen engagement through our audit-specific PPI Forums and the new NATCAN-wide PPI Network, ensuring that patient perspectives shape the evolution of our QI goals and the design and presentation of information. We will deepen our collaborations with professional bodies and clinical networks, building on initiatives such as the Royal College of Radiologists' Data Leads and Implementation Network, to promote the use of audit data in driving local improvements.

## Working in partnership to improve data quality

High-quality, timely data underpins all NATCAN activities. We will work closely with the National Disease Registration Service (NDRS) and the Wales Cancer Network to improve the completeness, accuracy, and timeliness of routine data. In England, this will include embedding NATCAN staff within NDRS, with the ambition that this work will expand the data items available in the Cancer Outcomes Services (COSD) and Rapid Cancer Registration Data (RCRD) datasets.

## Driving improvements through QI interventions

A major milestone from Q4 2025 is the roll-out of QI interventions across all audits, designed to close the audit cycle and deliver measurable impact. These interventions address key challenges linked to unwarranted variation in care, as well as major data issues, and are supported by practical resources such as action plan templates and provider-level benchmarking tools. Where relevant, they are aligned with national priorities, including reducing treatment variation. We will start to evaluate the interim impact and outcomes from these QI programme in the next year.

## Expanding our collaborations to amplify the audits' impact

Collaborations with external research teams, in parallel with harnessing the power of audit data, provide additional expertise that enables a deep dive into areas most in need of improvement. Audit findings have led to funded research to better understand variation in care and outcomes and to develop methodologies for NATCAN, such as [identifying recurrence in national, linked datasets](#).

We look forward to continuing to work with our partners in LSHTM, strengthening our collaborations with international registries to establish consensus on quality standards, and developing new relationships. In the coming year, we will begin working with the THIS Institute at the University of Cambridge to build an online cancer community focusing on improving the timeliness of curative treatment for bowel, breast, lung, and OG cancers.