

Summary of All Stakeholder Cancer52 Meeting

Cancer52 held its annual all stakeholder member meeting on Wednesday 16 October 2019.

Jane Lyons, CEO, Cancer52, introduced the meeting by giving an overview of Cancer52's achievements over the last year. These included:

- Successfully influencing the NHS Long Term Plan (LTP) so that rare and less common cancers were prominent
- Developing a patient voice video at Britain Against Cancer
- Convening a high-level policy roundtable to discuss the LTP
- Hosting a data conference jointly with Public Health England
- Speaking to Cancer Alliances about rare and less common cancers at their first meeting
- Jane being invited to sit on the National Cancer Board
- Launching a patient report at Parliament in July.

Future plans for Cancer52 include working with NCRI to explore how much research spend is spent on rare and less common cancers.

David Fitzgerald, Cancer Programme Director at NHS England, presented. He gave an update on the NHS Long Term Plan, explaining that there had been a shift in focus to early diagnosis. Other points included:

- The ambition to ensure that 75% of cancers are diagnosed at stage 1 and 2 by 20228 will not be achieved without a focus on rare and less common cancers. Early diagnosis is a primary determinant of survival and England will not match the best in Europe on survival without a focus on early diagnosis. There is pressure on the system, as referrals have gone up by 15% over the last year.
- The Cancer Programme's focus in 2019 has been on governance, cancer alliances as the leadership and delivery arm of the NHS LTP and business planning to turn the LTP into reality.
- The development of Rapid Diagnostic Centres (RDCs) is making good progress and there will be a workshop with Cancer52 members soon. The ambition is that by 2023/4 anyone with suspected cancer will be seen at an RDC.
- In primary care, a service specification for early diagnosis is being developed.
- Priorities for the next year include Cancer Alliances, who are working on their 5 years plans; operational performance (including the 62-day standard); the clinical review of standards; delivery of cancer services.

Heidi Livingston, Public Involvement Adviser, and Lizzie Thomas, Senior Public Involvement Adviser, both from NICE also presented.

Lizzie Thomas explained how the review of methods and process will work. There will be various task and finish groups, on which some members of Cancer52 will be represented. Lizzie explained that it has been mandated that the QALY threshold of 20-30k will not be reviewed but

the inputs that go into the QALY can be looked at. So how unmet need, curative potential, real life evidence and qualitative evidence can be incorporated into NICE methods and processes will all be considered.

Heid talked through the results of a survey of the patients and public about how NICE involves them in their work. Feedback included that it can be daunting for patients to be a member of a committee. This work will also feed into the NICE methods and process review.