

USING DATA & QUALITY INDICATORS TO DRIVE OPTIMAL, EQUITABLE CANCER CARE

ACCN INNOVATION SHOWCASE

MAY 2024

DISCLOSURES

- Funder of Prostate Cancer Outcomes Registry (Australia and New Zealand)
- Funder of TrueNth Global Registry and Ironman Registry
- Funder of the Irish Prostate Cancer Outcomes Registry
- Co Funder of Real World Evidence Network for Cancer (with Australian Government)

ABOUT MOVEMBER

Started in a pub in Melbourne in 2003, now the largest global movement for men's health.

Prostate Cancer Biomedical research



Clinical Quality Improvement **108N**

Cancer Survivorship



Testicular Cancer





PAN CANCER COLLABORATION

- \$22.5 million partnership with Movember, Australian Government and ten cancer conditions
- Initially gynaecological, bowel, thyroid, pancreatic and oesophagogastric (upper gastrointestinal), prostate, melanoma, lung, lymphoma, and myeloma cancer

DRIVING PROMS + PREMS ADOPTION & IMPLEMENTATION

- Achieve consensus on a nationally agreed and standardised set of PROMs and PREMs
- Integrate PROMs and PREMs data collection into a national pan-cancer collection platform + real world PROMS platform partnerships
- PROMs and PREMs consumer education campaign

DATA AUTOMATION INNOVATION

 Invest in clinical data automation solutions to enhance sustainability, scalability of CQRs

ADVANCE CQRS & PROMS RESEARCH

- Using PROMS to deliver personalised cancer care (prioritising equity)
- Supporting Clinical Quality Registries

USING DATA TO IMPROVE QUALITY

- Pan cancer clinical benchmarking tool through on-demand reporting of risk-adjusted data to support quality improvement initiatives
- Pilot program for public access to benchmarking to empower patients and improve transparency

SECTOR OPPORTUNITIES

 Research (inc. real world settings) to use PROMS to improve health outcomes (self management, clinical triggers)



Learn from other Bros like you

We've pulled together dozens of insights from men with prostate cancer. Explore each section below to get the real deal.

About these results

- represents other Bros like you who were in age range of 60 to 65 years and had surgery as the main treatment 12 months after diagnosis
- 🖈 you as reported today (from the questions you answered)

URINARY ISSUES

Urinary Incontinence



Urinary Irritation

Very small problem Big Problem

SECTOR OPPORTUNITIES

 Clinical quality improvement through benchmarking

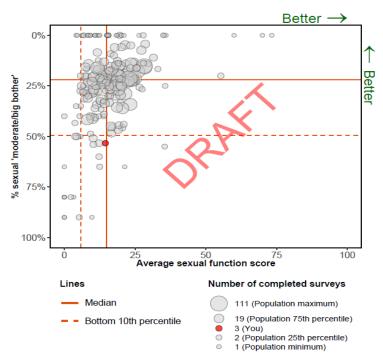
7. SEXUAL BOTHER AND FUNCTION AT 12-MONTH FOLLOW-UP POST EBRT

Figure 7 displays sexual bother and sexual function 12 months after EBRT treatment. Participants are invited to complete the EPIC-26 quality of life survey 12 months after treatment. Men are asked "Overall, how big a problem has your sexual function or lack of sexual function been for you during the last 4 weeks?" Possible responses are a) No problem b) A very small problem c) A small problem d) A moderate problem e) A big problem. To assess sexual function men are asked to comment on the quality and frequency of erections.

We display the percentage of men reporting moderate or big bother and the average sexual function score for your EBRT patients. A high sexual function score indicates good function.

Appendix D provides a list of men who report their sexual function as being either moderate or big bother in the last reporting period.

Figure 7: Multi-dimensional representation of self-reported sexual function and sexual bother 12 months after EBRT treatment.



SECTOR OPPORTUNITIES (PRIORITISING EQUITY)

- Better understand patient outcomes and experiences at multiple levels
- Empowering patients to understand and use data to make informed treatment decisions
- Innovation in automation of clinical data to measure and improve cancer care

MORE INFORMATION

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