

ACCN Innovations Showcase

7th May 2024

Cancer Alliance Queensland

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The impact of Cancer in Australia

Burden of disease and health loss

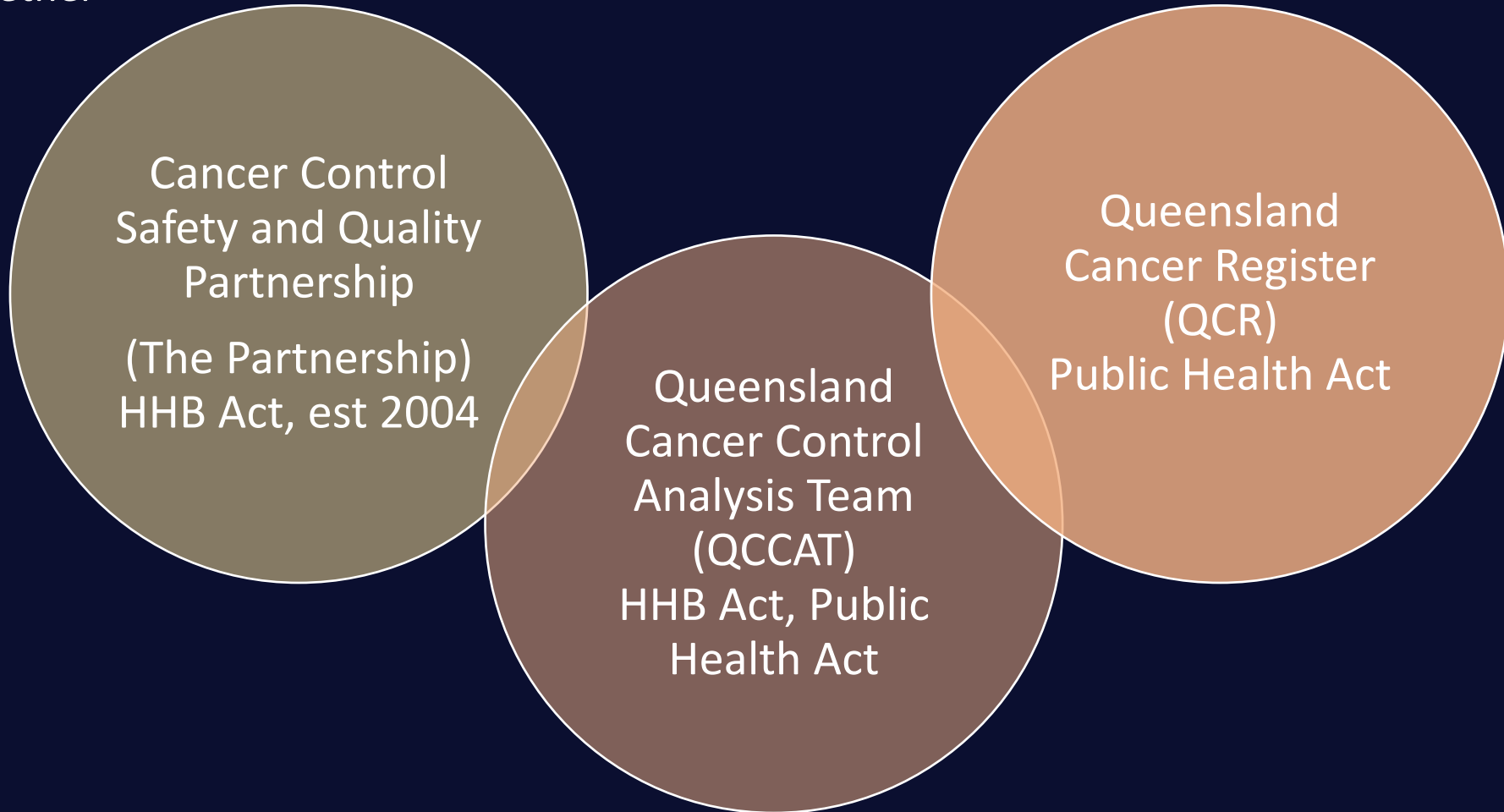
Leading cause = Cancer (*over cardiovascular disease, musculoskeletal disorders and mental disorders*), contributing 16.8% (CHO report, 2022)

Expenditure

Cancer = disease group with the third greatest health system expenditure accounting for 8.8% of the \$134 billion disease-specific expenditure (\$11.7 billion) in 18/19 (AIHW)

Cancer Alliance Queensland

brings together



...for all Queenslanders with cancer

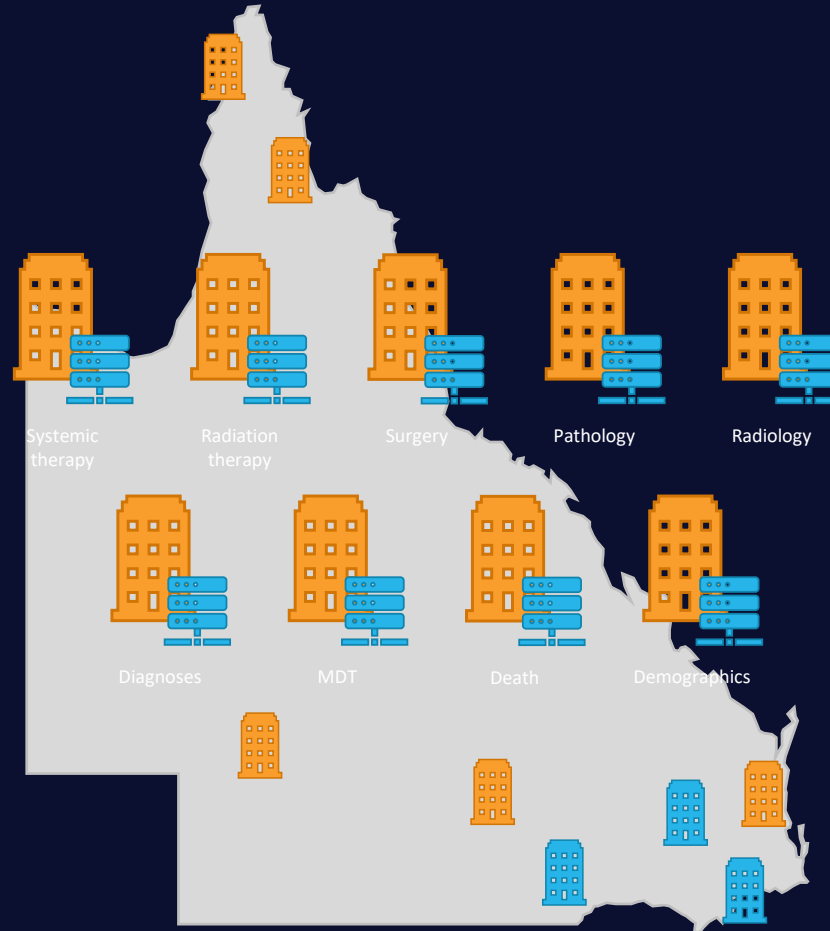
Queensland Oncology Repository (QOR)

The repository is at the core of our program of work and underpins:

- Statewide cancer safety and quality program
- Systems, tools and applications
 - Cancer Data explorer
 - QOOL
- Research

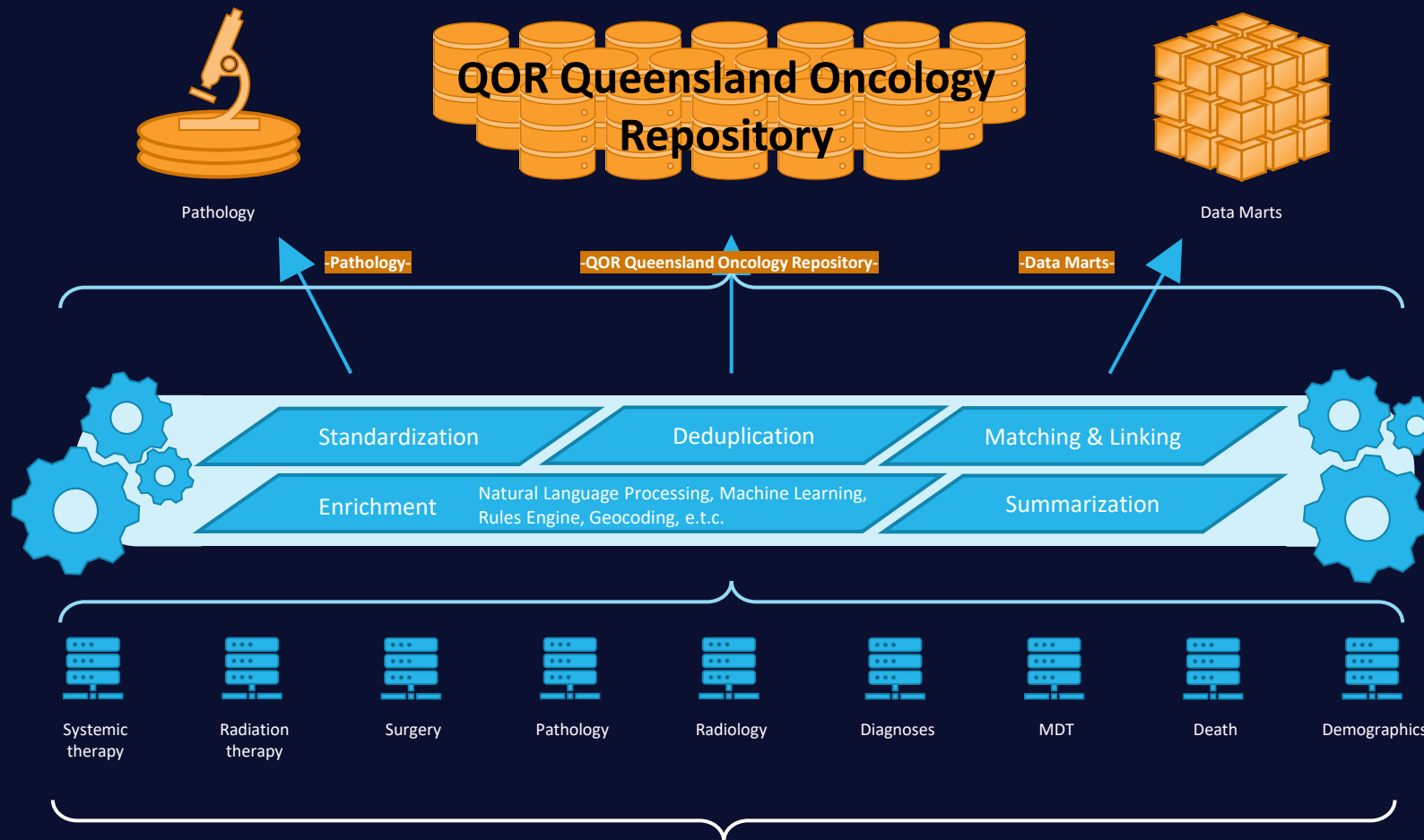


Queensland Oncology Repository - *Data is our strength*



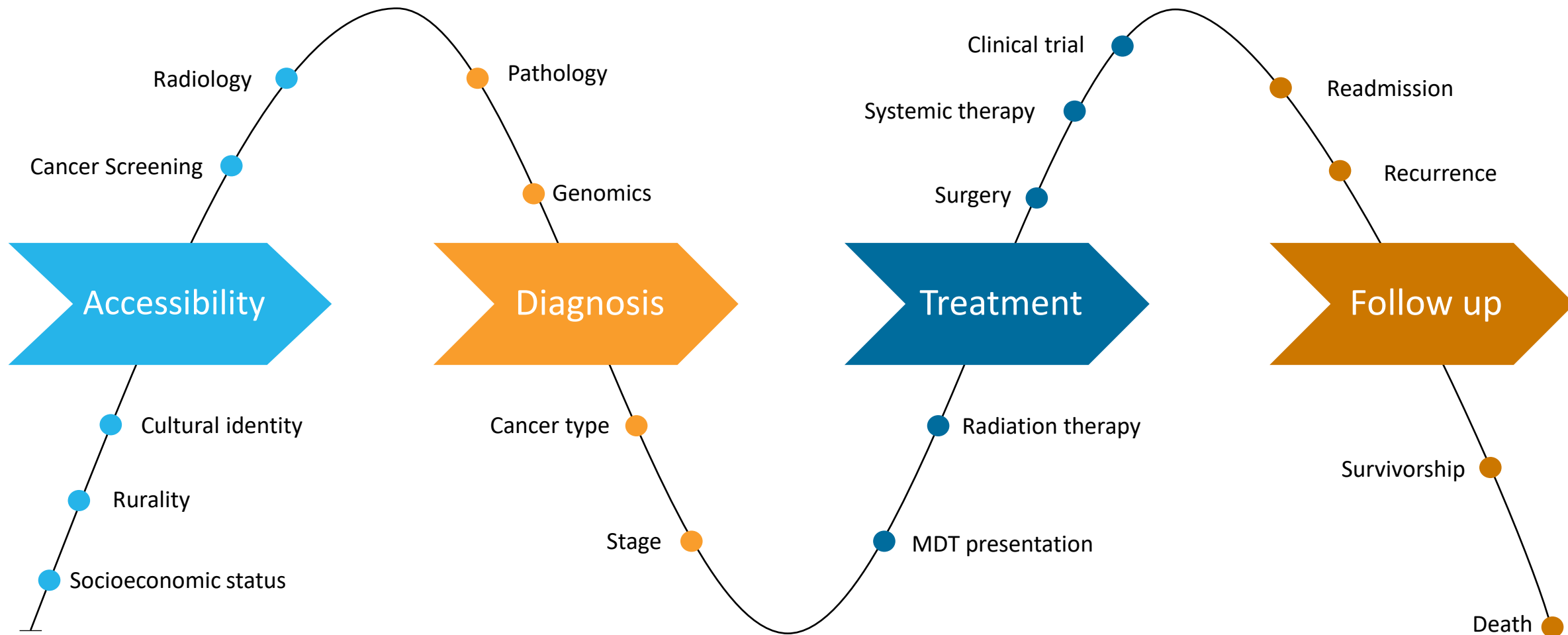
Queensland Oncology Repository

1,000,000+ matched and linked records



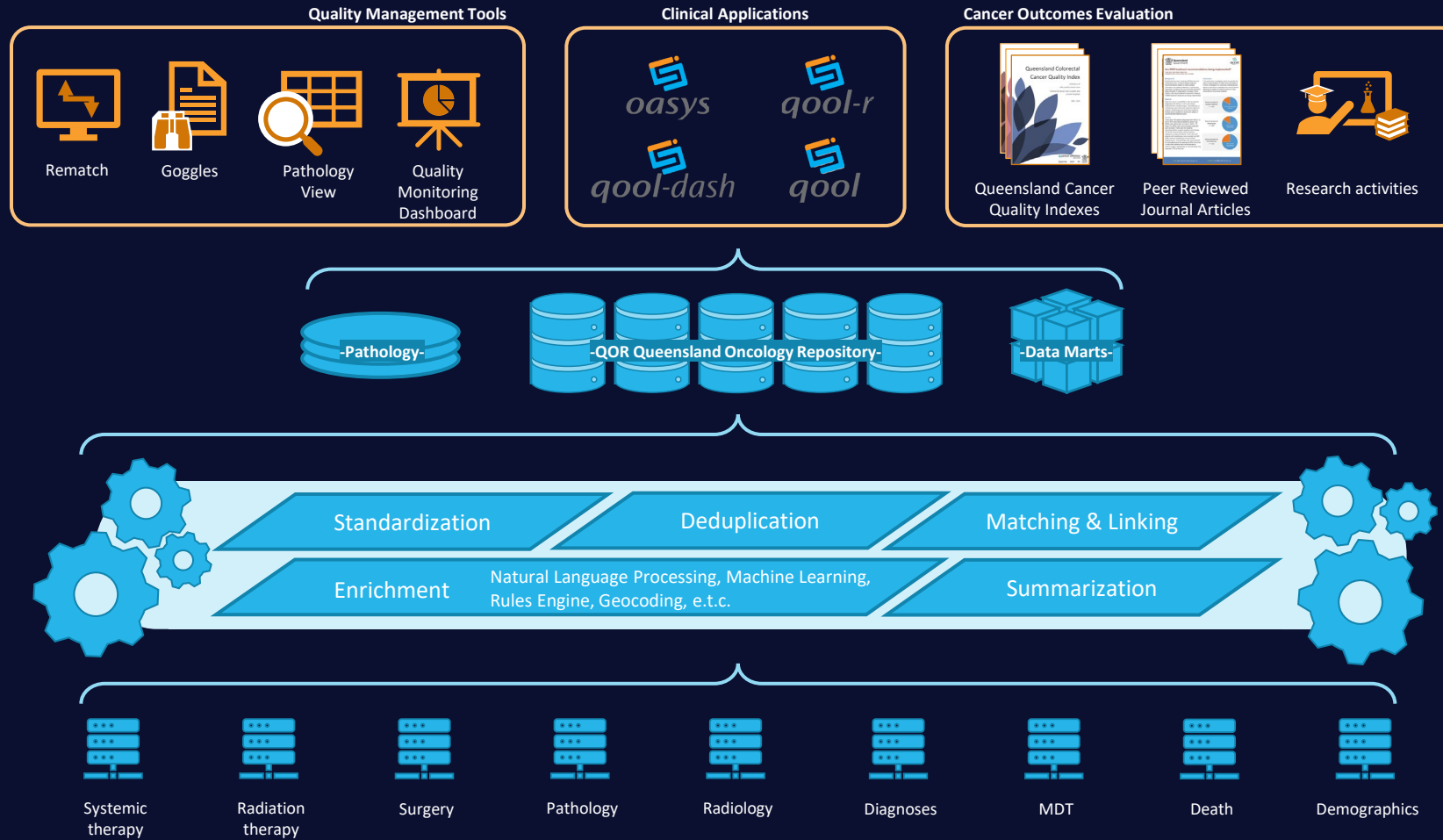
3.25 billion pieces of information

Prospective lifelong record for every person with cancer



Cancer Information Landscape

Systems, tools & data for understanding cancer care



QOOL: the trusted source of information for MDTs

Type	Description	Date	Provider	Source		
Systemic therapy	ZOLEDRONIC ACID 6 MONTHLY LIMS - SCOH	17/06/2019	Sunshine Coast University Hospital	CHARM-FAH	OPEN	VIEWER
Radiation therapy	Received dose: 44.0 Gy, Fraction 22	12/11/2018	ROC - Maroochydore	ROC	OPEN	VIEWER
Systemic therapy	CYCLOPHOSPHAMIDE-DOXORUBICIN-FACITAXEL WEEKLY (AC 3 WEEKLY X 4 + FACITAXEL X 12) - SCOH	09/07/2018	Sunshine Coast University Hospital	CHARM-FAH	OPEN	VIEWER
Systemic therapy	FACITAXEL - WEEKLY	18/06/2018	Sunshine Coast University Hospital	CHARM-FAH	OPEN	VIEWER
Systemic therapy	REDUCING PRE-MED REGIME - SCOH	18/06/2018	Sunshine Coast University Hospital	CHARM-FAH	OPEN	VIEWER
Systemic therapy	CYCLOPHOSPHAMIDE-DOXORUBICIN (AC) DOSE DENSE - SCOH	21/05/2018	Sunshine Coast University Hospital	CHARM-FAH	OPEN	VIEWER
Systemic therapy	CYCLOPHOSPHAMIDE-DOXORUBICIN-FACITAXEL WEEKLY (AC 3 WEEKLY X 4 + FACITAXEL X 12) - SCOH	30/04/2018	Sunshine Coast University Hospital	CHARM-FAH	OPEN	VIEWER
MDT	Breast Multidisciplinary Team Meeting	23/03/2018	Sunshine Coast University Hospital		OPEN	VIEWER
Radiology/Pathology	HISTOPATHOLOGY (Histology)	15/03/2018	SNP		OPEN	VIEWER
Surgery	Simple mastectomy, bilateral	14/03/2018	Sunshine Coast University Private Hospital	Admitted Patients	OPEN	VIEWER
Surgery	Sentinel lymph node biopsy, axillary	14/03/2018	Sunshine Coast University Private Hospital	Admitted Patients	OPEN	VIEWER
Surgery	Radical excision of lymphatic structure, axillary	14/03/2018	Sunshine Coast University Private Hospital	Admitted Patients	OPEN	VIEWER

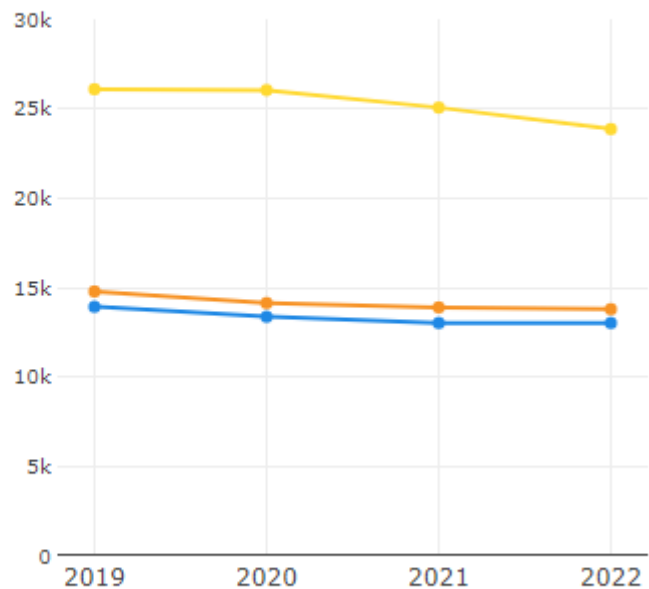
- Aligned with clinical care
- Integration of data from external applications (purple)
- Removes geographical barriers between data, clinicians and patients
- Web-based - available securely anywhere, anytime
- Data used for local and state-wide quality activities & research
- **800 +** clinical users
- **67** MDTs
- **201,473** patients recorded

QOOL Dash – my MDT activity

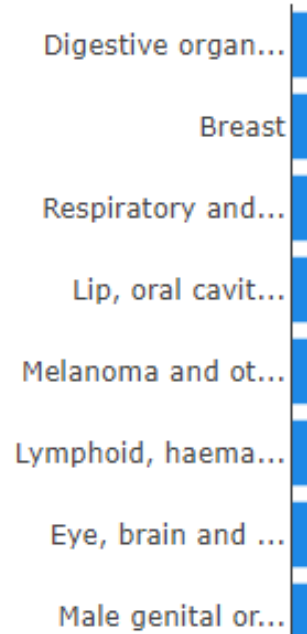
My MDT Activity Trend

All / 2019, 2020, 2021, 2022

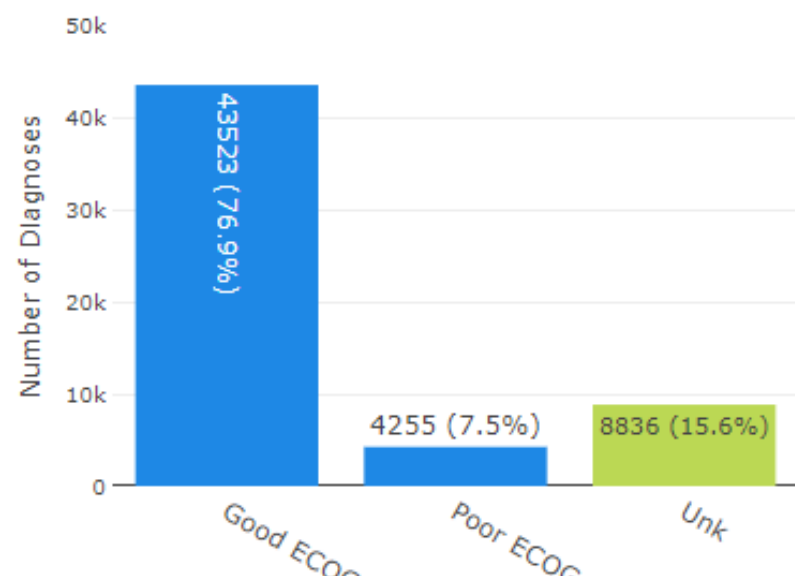
53,344 Patients
 56,614 Diagnoses
 101,081 Presentations
 78.5% Representation rate
 10538 Records excluded from data analysis



Cancer Type



ECOG



QOOL Dash – real time clinical indicators

[LUNG](#) [BRAIN](#) [HEAD AND NECK](#) [AML](#)

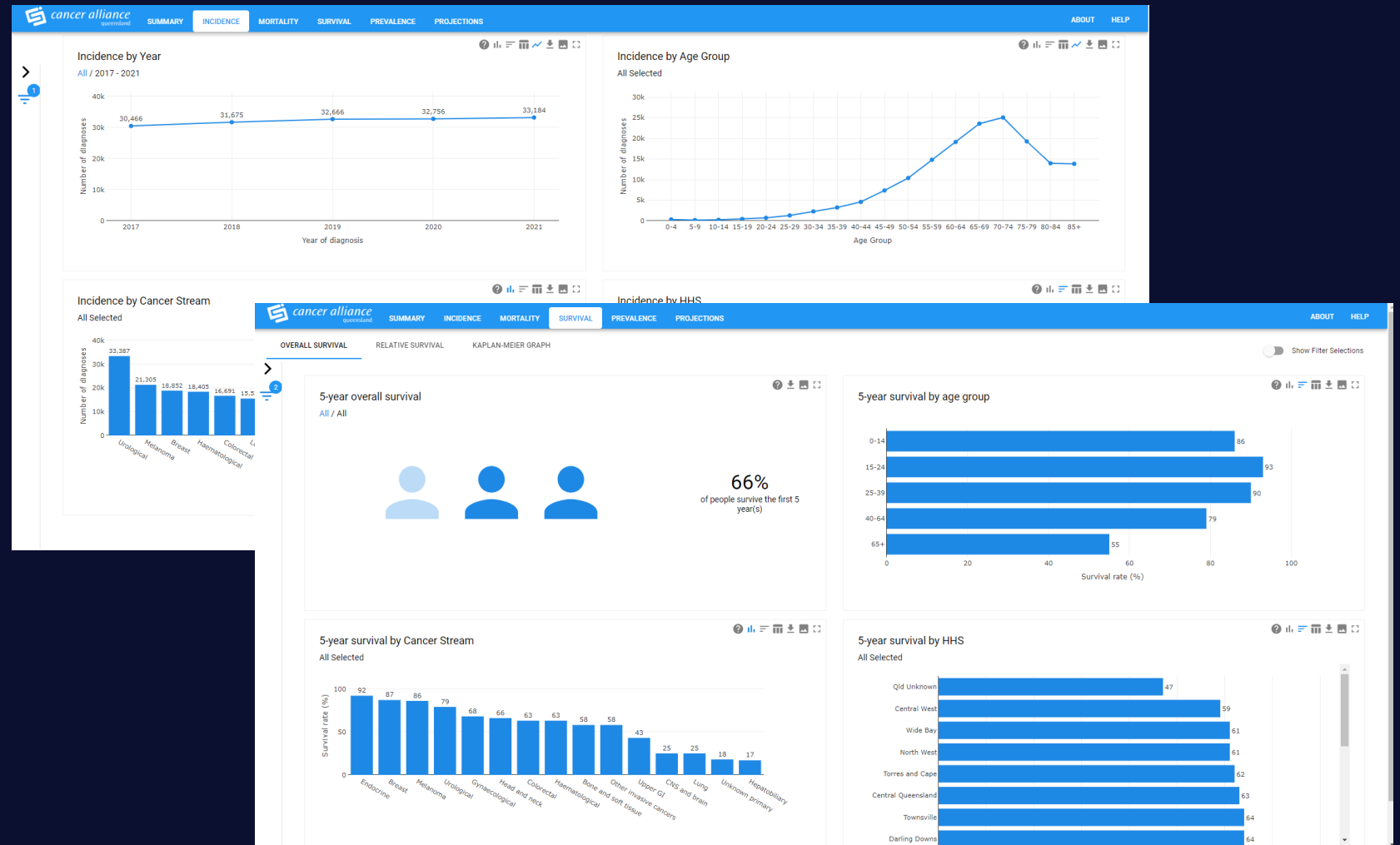
[DOWNLOAD PATIENT DETAILS](#)

Indicator	My MDT(s)	QLD 2011-2016*
Number of patients with NSCLC	2551	10958
Percentage of patients with ECOG	97% (2479/2551)	-
Percentage of patients with Stage	71% (1799/2551)	-
Received first treatment within 30 days of diagnosis	41% (887/2144)	46% (3755/8101)
Surgery		
Surgery rate in patients with stage I disease	69% (281/405)	72% (1311/1829)
Surgery rate in patients with stage II disease	57% (109/190)	59% (493/841)
Surgery rate in all patients	21% (546/2551)	20% (2206/10958)
Received 1st surgery within 30days of diagnosis	41% (213/523)	53% (1116/2092)
Prolonged LOS ≥ 12 days	11% (60/546)	14% (319/2206)
In-Hospital mortality	0.4% (2/546)	0.6% (13/2206)

Queensland Cancer Data explorer

Cancer data that is transparent, open, accessible, useful

What is the impact of cancer in my HHS?



CAQ Strategic Plan 2024 -2026



Key opportunities

- Prepare for the **future** – Australian Cancer Plan, National benchmarking, QLD cancer centre, ageing population, clinical advances in care, genomics, novel therapies
- Address the **equity** gap – better connected care, systems that integrate with and coordinate care and support the people who deliver the care.
- Use real-time monitoring and powerful **analytics** to deliver more proactive and targeted care, reducing costs and improving outcomes, KPIs, QOOL.



Queensland real world evidence for meaningful KPIs



GOVERNANCE FOR ROUTINE
MONITORING AND
EVALUATION



QUEENSLAND POPULATION
DATA INFORMING PRACTICE



REAL WORLD EVIDENCE FOR
BENCHMARKS AND TARGETS



IMPROVING OUTCOMES FOR
QUEENSLANDERS WITH
CANCER

Queensland Cancer Quality Index

Indicators of safe, quality cancer care

2007-2021

16 indicators (KPIs) addressing 5 domains of cancer care

Effective

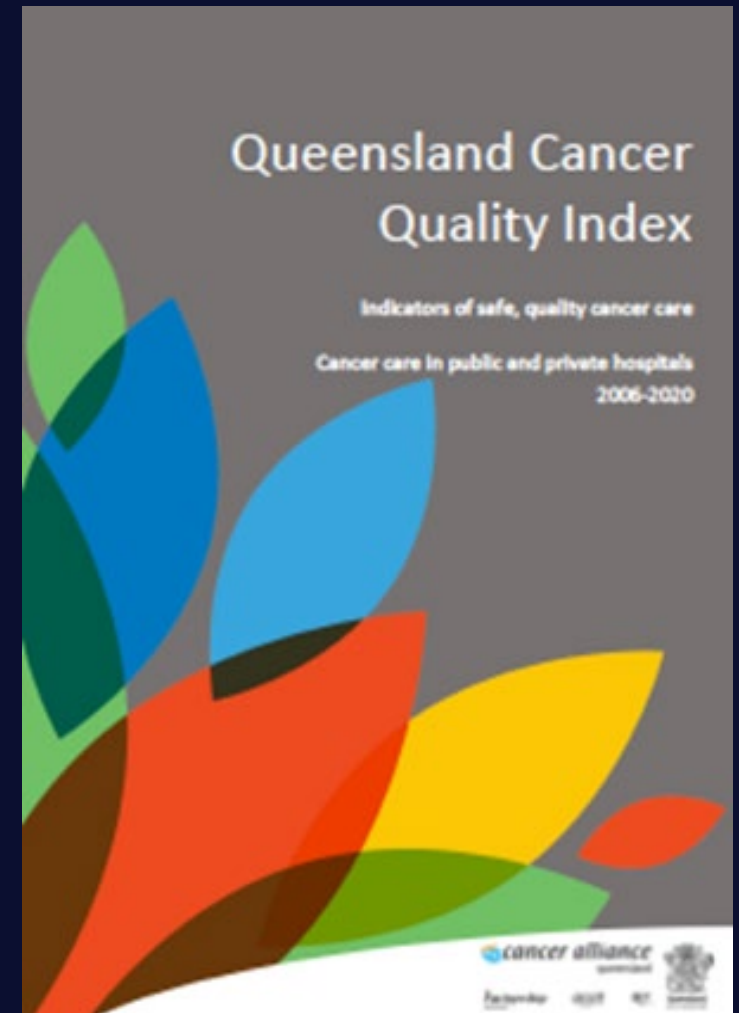
Efficient

Safe

Accessible

Equitable

(Walpole, Theile, Philpot et al. 2019)





Two seminal reports

Treating people with cancer in Queensland and Victoria: national benchmarking starts here

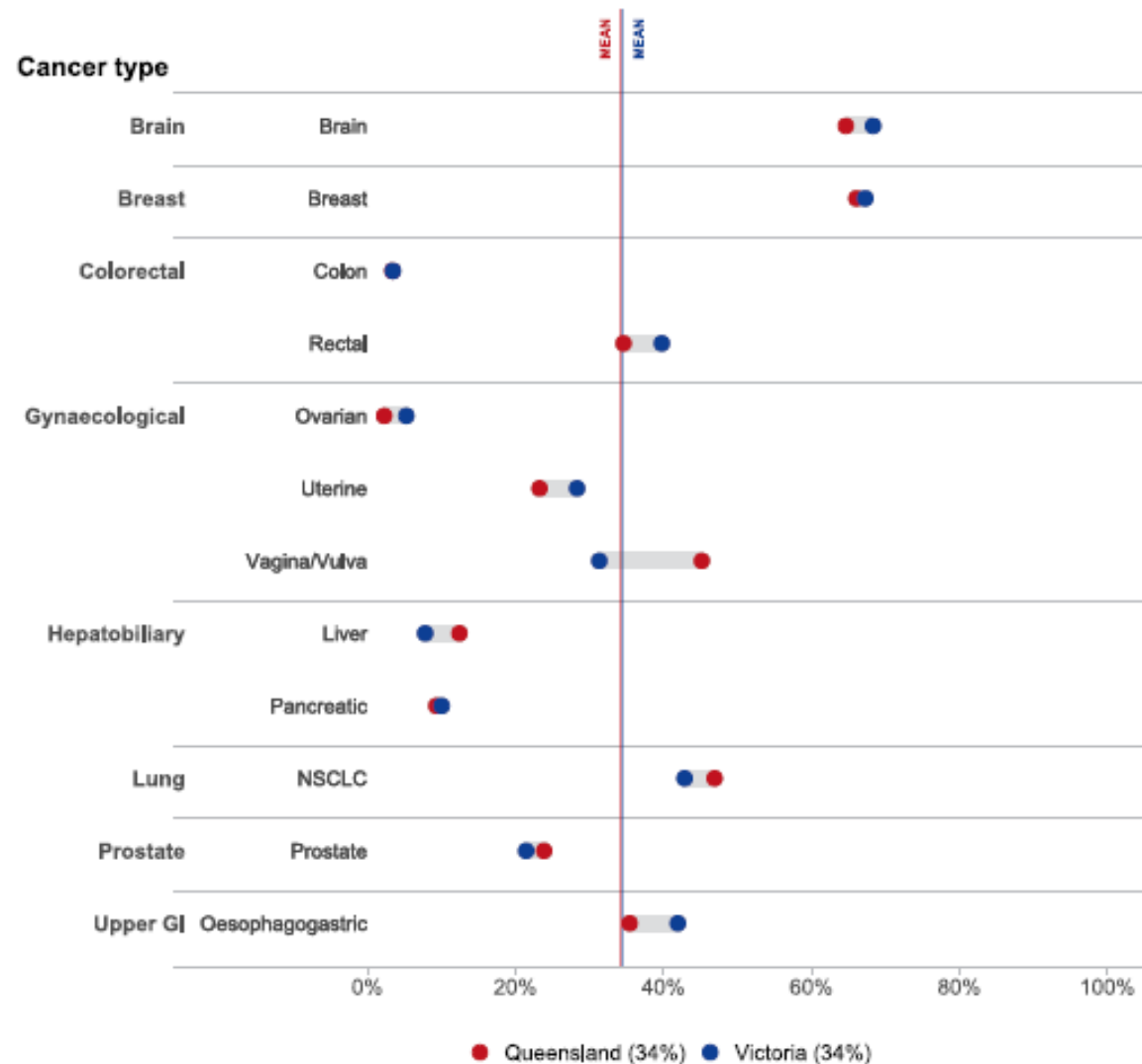
Cancer care in public and private hospitals 2015-2019 1st edition

Treating the 6 most common cancers in Queensland: a report for Health and Hospital Services

Indicators of safe, quality cancer care 2017-2021

Cancer Care for Queensland Women and Girls' (in development)

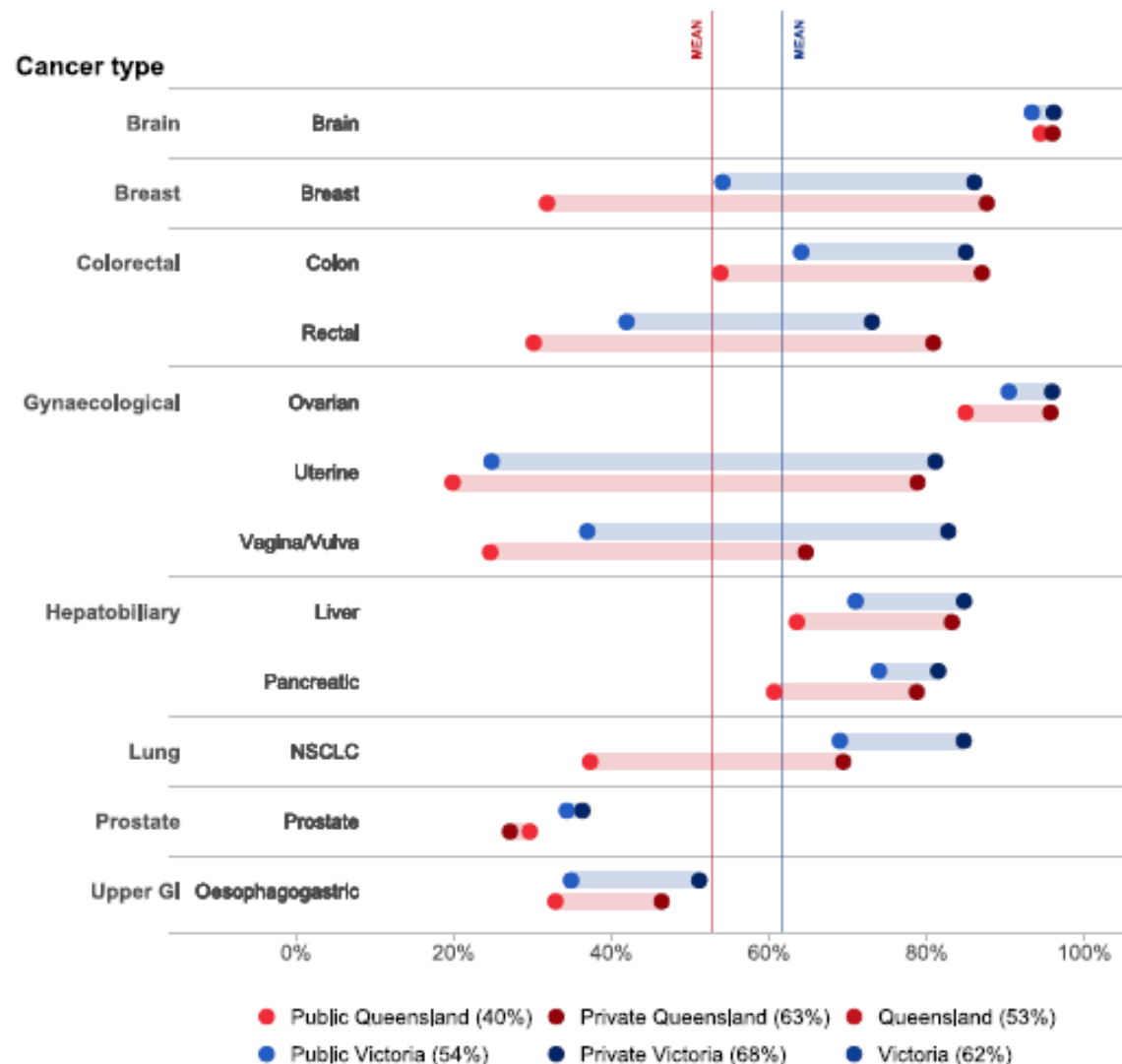
National | Effective | Queensland vs Victorian patients receiving radiation therapy



External beam radiation therapy rates are similar across both states for high volume cancers.

While RT rates have not increased, more people are receiving RT closer to home

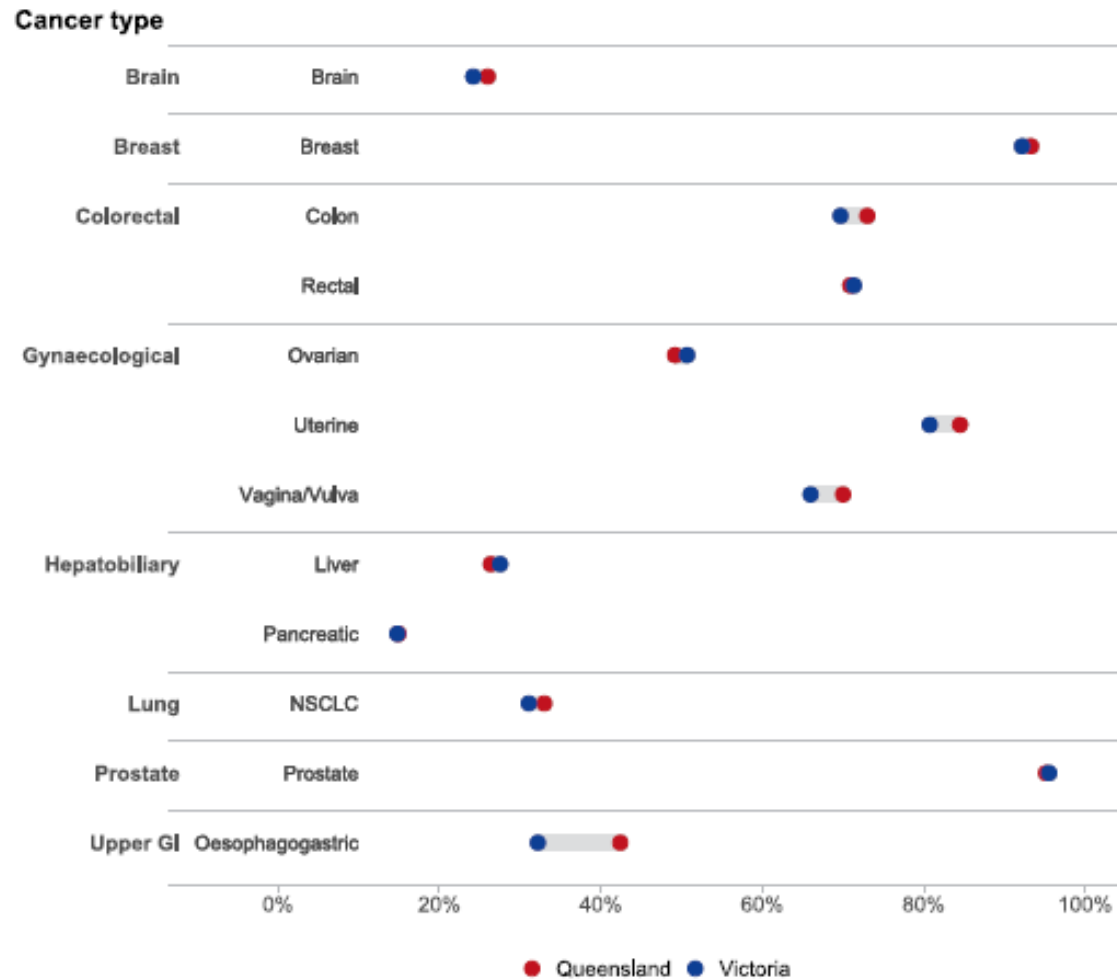
National | Access | Queensland vs Victorian patients receiving first cancer surgery within 30 days of diagnosis?



Patients commencing treatment at private facilities are twice as likely to start treatment within 30 days of diagnosis.

More Victorian patients receive first cancer surgery within 30 days of diagnosis

National | Outcomes | Queensland vs Victoria 5-year relative survival



Relative survival was calculated using the Ederer II method, and the period approach was used. Relative survival was calculated for all persons aged 0-89 at diagnosis. Refer to supplementary counts for further information.

5-year relative survival is similar between Queensland and Victoria for selected cancers.

Treating the 6 Most Common Cancers in Queensland

A report for Hospital and Health Services

Indicators of safe, quality cancer care

2017-2021



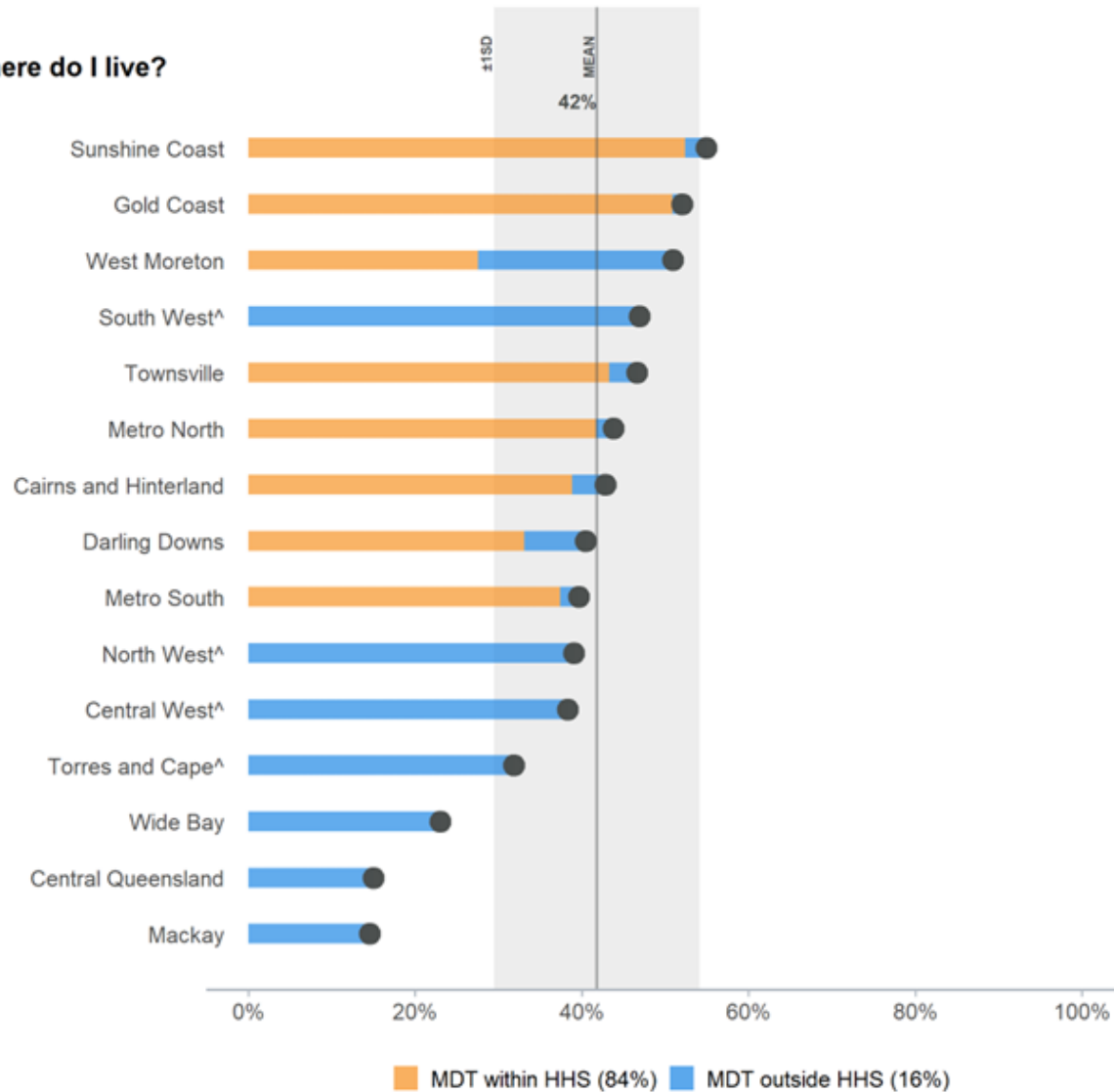
Treating the 6 most common cancers in Queensland: a report for Health and Hospital Services

Indicators of safe, quality cancer care 2017-2021



Queensland | Effective | Queenslanders receiving Multidisciplinary Team review

Where do I live?

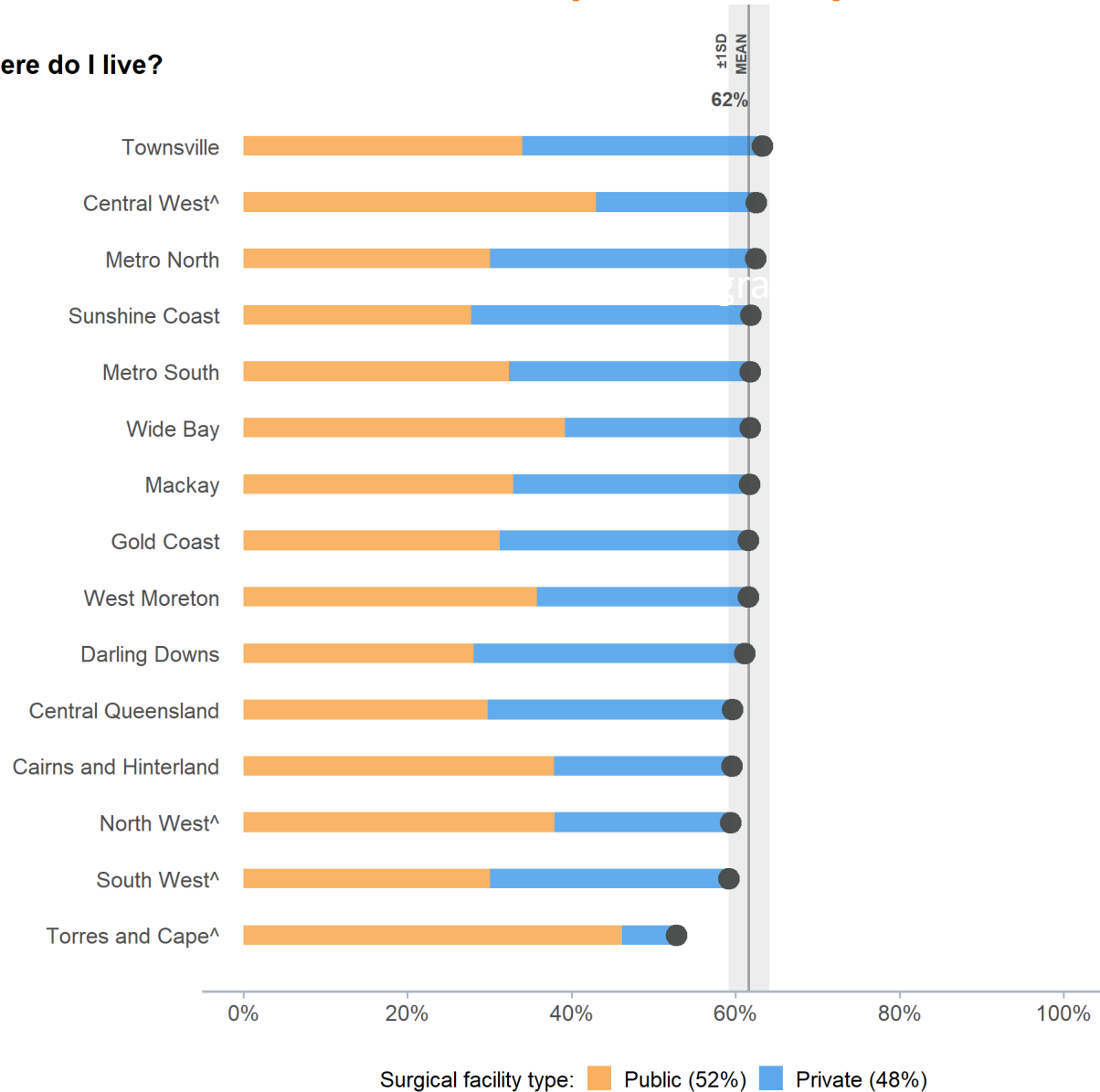


MDT rates includes facilities that use QOOL, or Townsville ROIS, or lung cancer conference at PA Hospital.
 ^ = Unadjusted rate. Refer to Appendix for adjustment methodology.

People diagnosed with cancer are more likely to have their care discussed at an MDT if they're able access this within their Hospital and Health Service.

Queensland | Effective | Queenslanders receiving cancer surgery

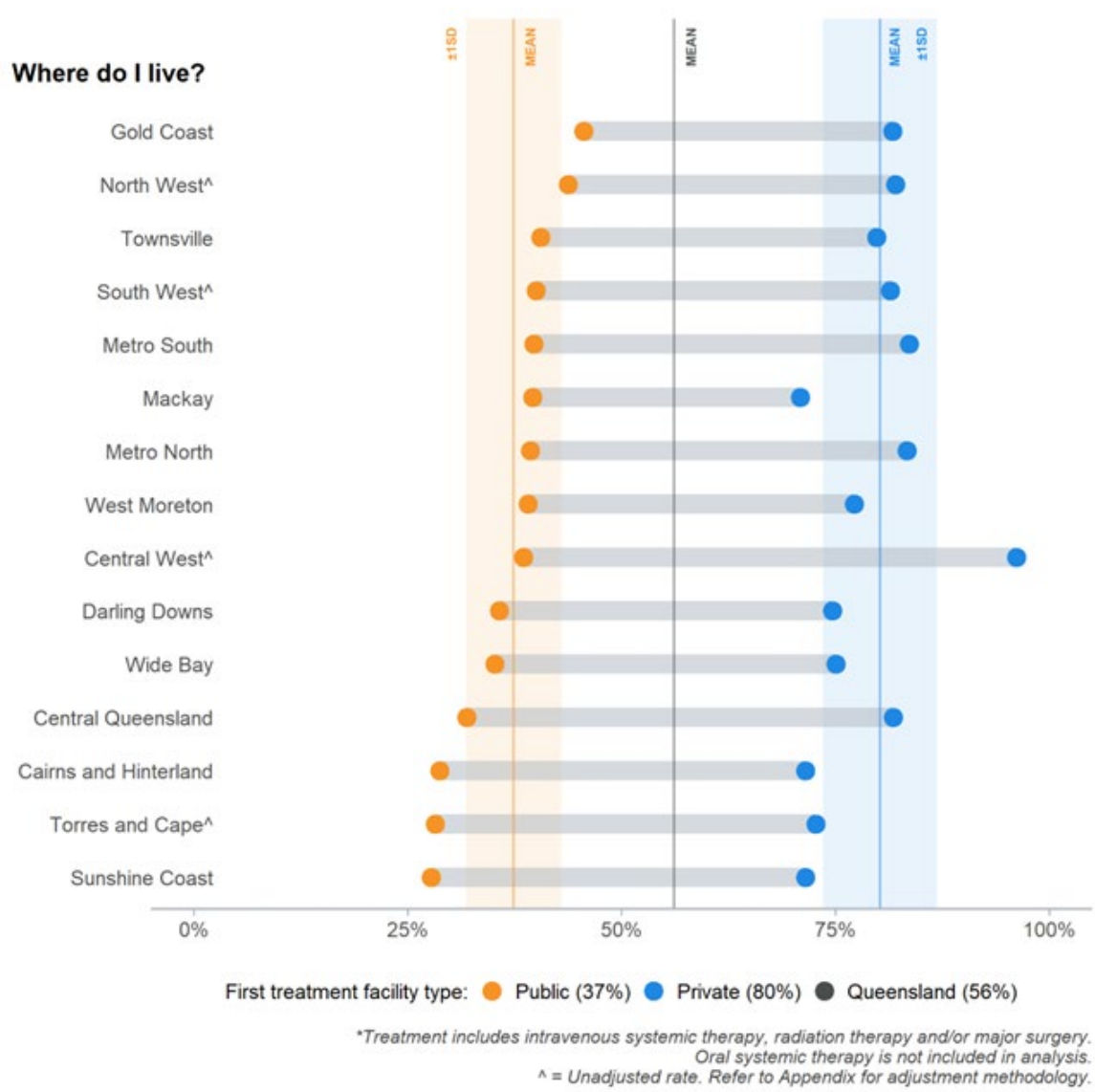
Where do I live?



Surgery rates are similar statewide and are evenly distributed between the public and private sectors.

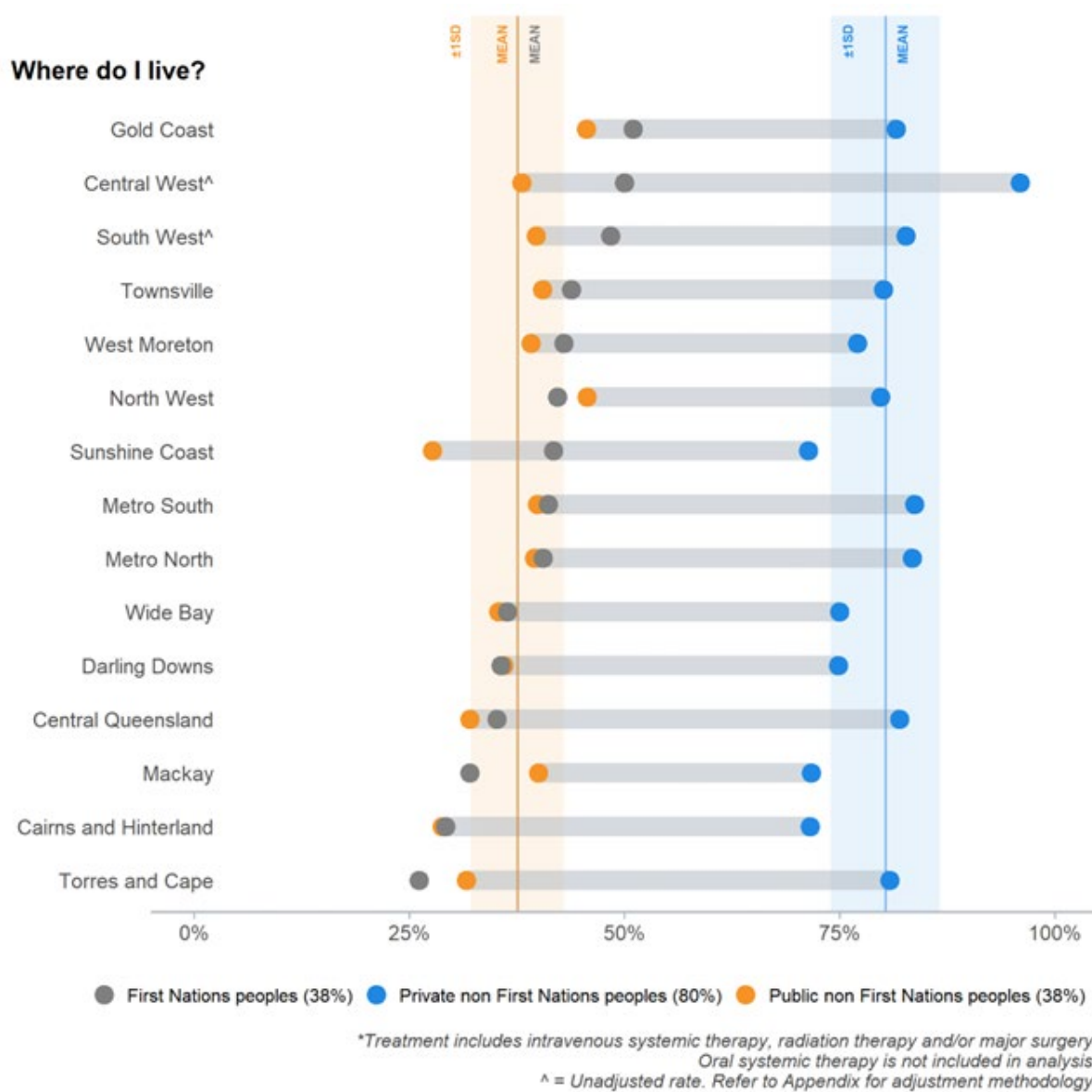
^ = Unadjusted rate. Refer to Appendix for adjustment methodology.

Queensland | Access | Public compared to Private patients receiving their first cancer treatment within 30 days of diagnosis



Queenslanders diagnosed with cancer who commence treatment at private facilities are twice as likely to start treatment within 30 days of diagnosis.

Queensland | Equity | First Nations peoples receiving first cancer treatment* within 30 days of diagnosis?

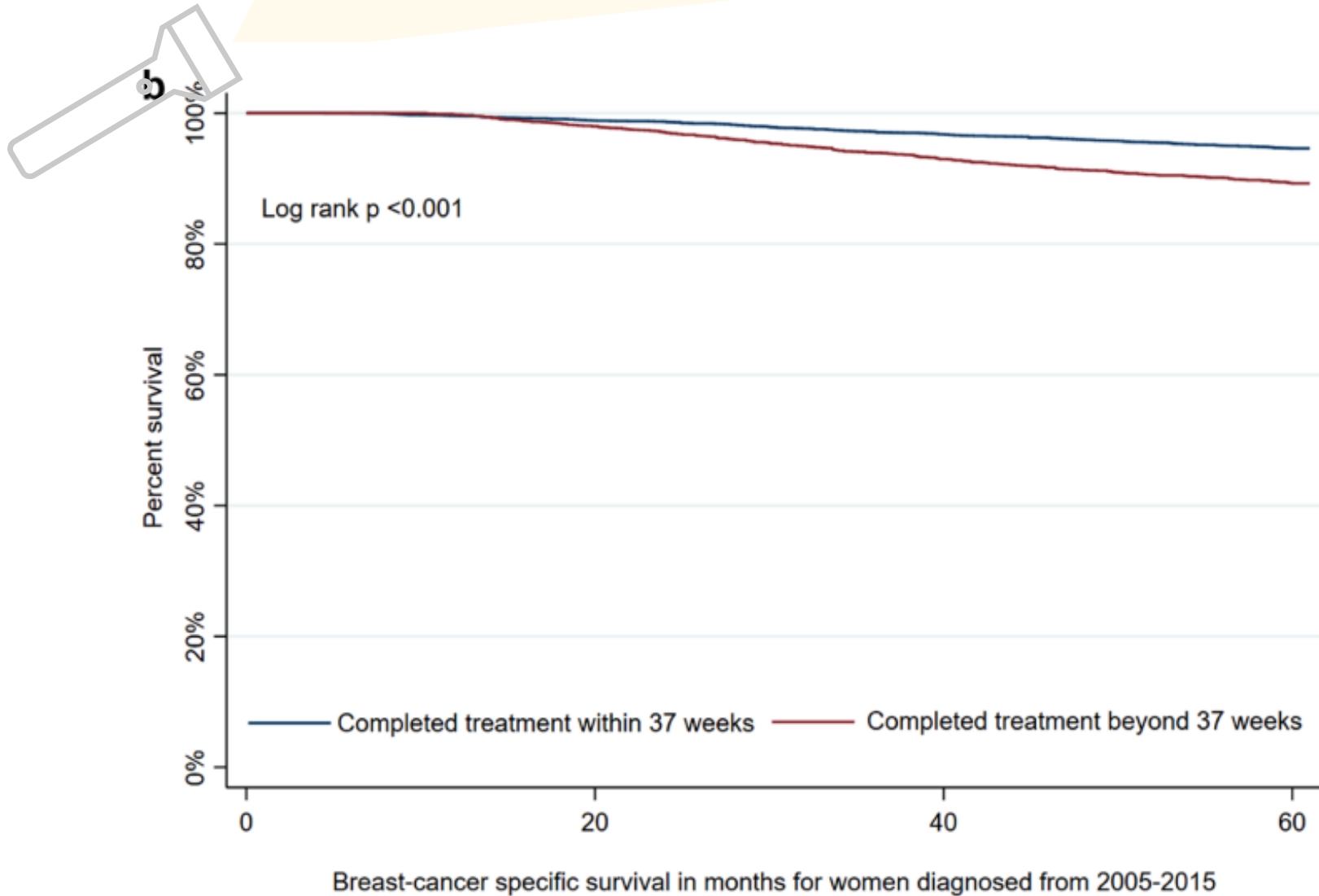


Time to treatment is similar among First Nations people and those non-First Nations people treated in the public sector.

First Nations people are predominantly treated for cancer in public facilities.



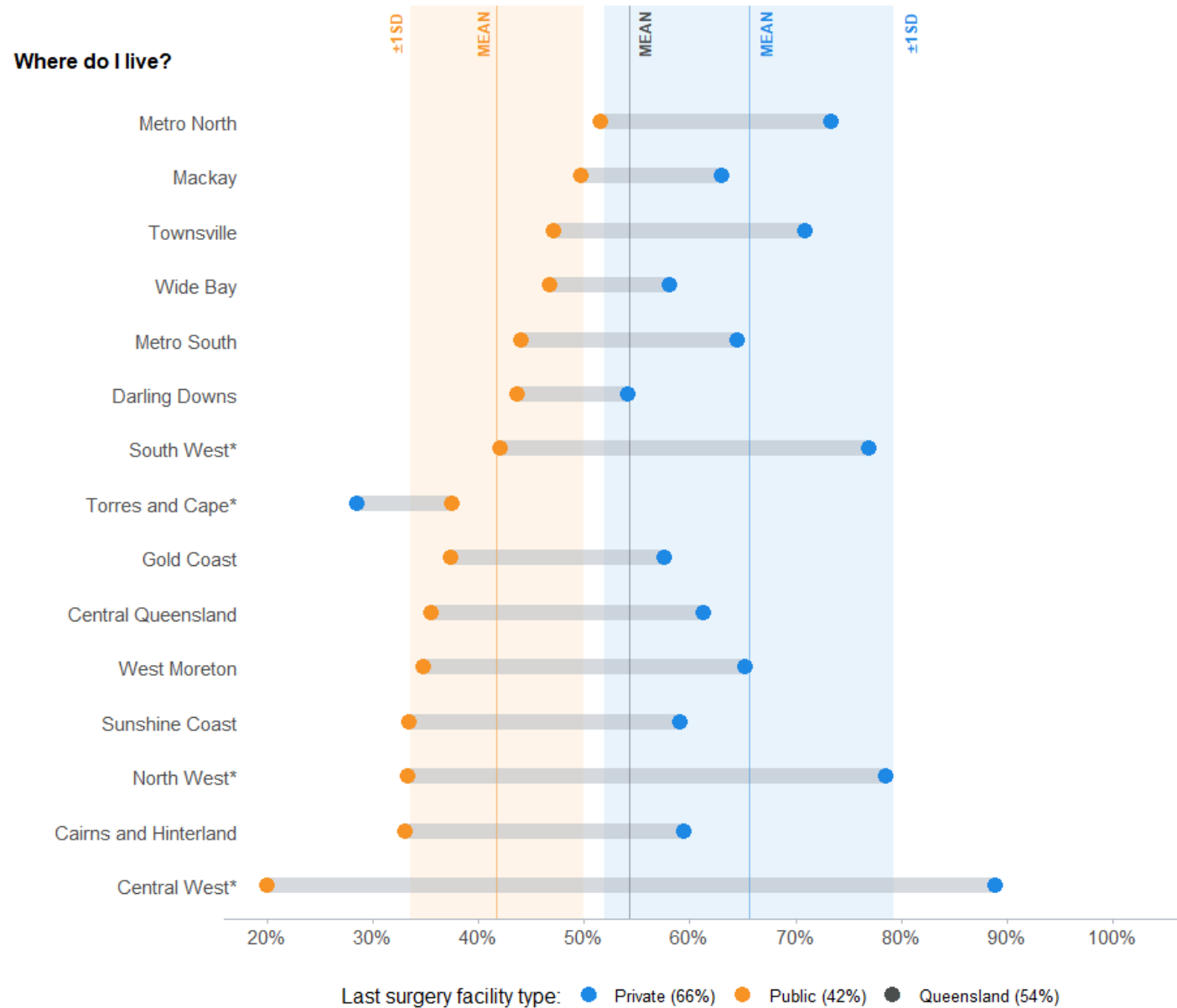
Queensland | KPI | Five-year breast cancer-specific survival by time to treatment completion



Women completing treatment beyond 37 weeks have poorer 5-year survival



Queensland | KPI | Breast cancer - treatment completion >37 weeks by HHS



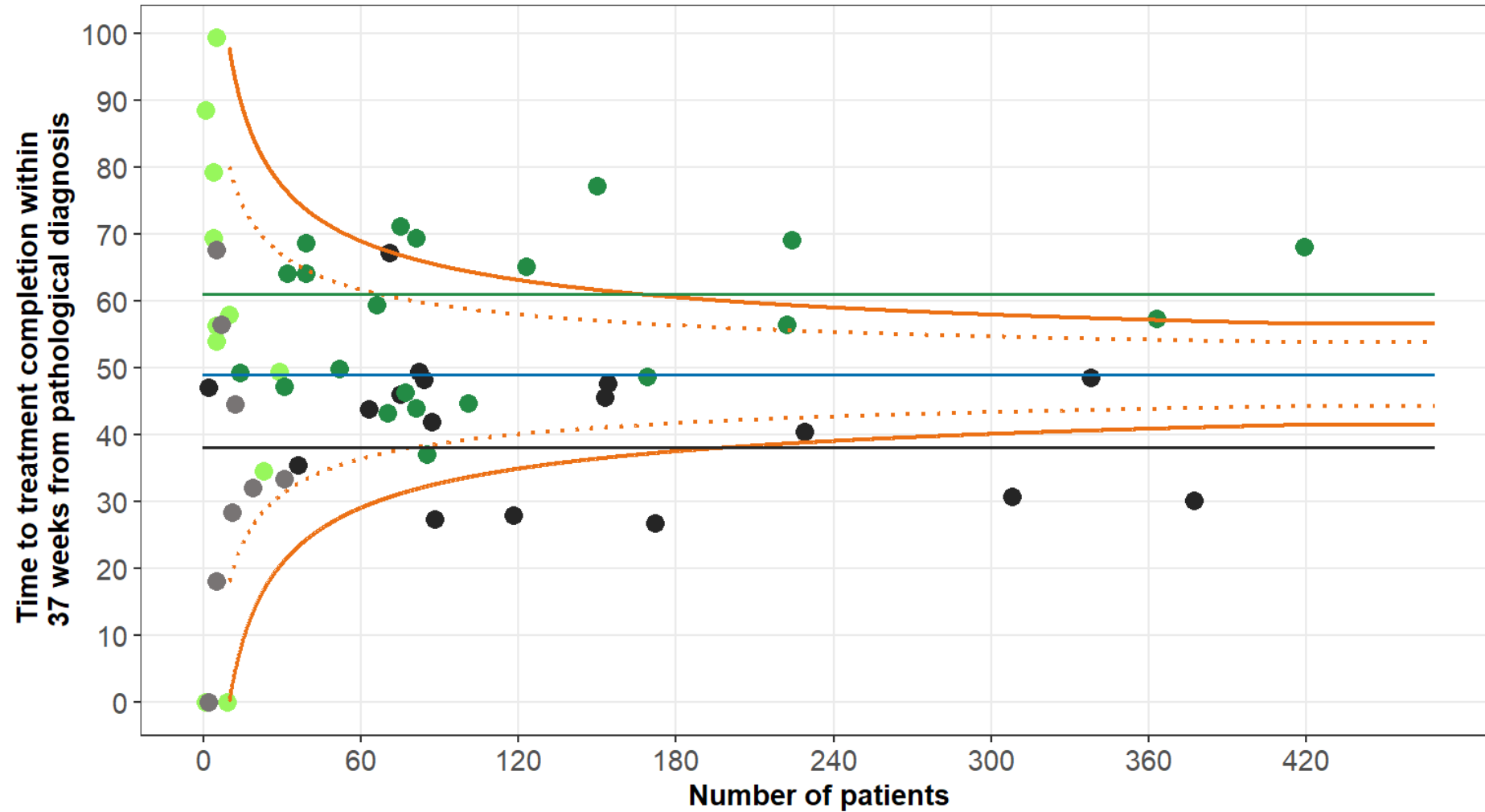
There is variability between HHSs in women completing breast cancer treatment <37 weeks

* = Unadjusted rate. Refer to Appendix for adjustment methodology.



Queensland | KPI | Percentage of female invasive breast cancer patients who received and completed surgery, IVST and radiation therapy treatment within 37 weeks from diagnosis by hospital

Diagnosis year 2015-2019 | Adjusted rates, 5 years combined



- Public Hospitals
- (LV) Public Hospitals
- Private Hospitals
- (LV) Private Hospitals
- Queensland Average (49%)
- Private Hospital Average (61%)
- Public Hospital Average (38%)
- ⋯ 95% Confidence Interval
- 99.8% Confidence Interval

18 subcommittees of the - Qld Cancer Control Safety and Quality Partnership

Brain
Breast
Colorectal
First Nations
Gynaecology
Haematology
Head and Neck
Liver and Pancreas
Lung

Melanoma
Non-melanoma skin
Oesophagogastric
Paediatric
Radiation Oncology
Sarcoma
Systemic Therapy
Youth Cancer
Urology

Next steps - Pursue strategic priorities to deliver excellence

Queensland government can play leadership role nationally.

Requires government support to secure the sustained impact as a national leader and cross-sectoral enabler of service improvement, to attract continual investment in Queensland.

- Maintain CAQ as **independent entity**
- Address **equity** gaps affecting **First Nations Peoples, women** and those in **regional and remote** areas, establishing the first **Cancer Consumers Queensland** and **First Nation's Peoples** committees.
- Embed strategic roles within CAQ to assist Government, HHSs to advocate for and support development of **statewide cancer care policies, strategies and plans**

...for all Queenslanders with cancer



Cancer Alliance Queensland



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