

INNOVATIVE PARTNERSHIP FOR ACTION AGAINST CANCER (iPAAC)



Task 4, WP8
"Challenges in Cancer Care"

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WP 8 "Challenges in Cancer Care"

- The overall aim of the work package is to define strategies to improve the quality of cancer care by optimising the use of healthcare resources and promoting realistic and evidence-based responses to existing needs.
- Task 4 of the project "Economics of cancer care" concern increasing value in health care delivery

Glossary



- Any practice that does not provide significant added value to patients.
- Inefficiencies can therefore occur at different levels. They can include the use of diagnostic or therapeutic interventions from which patients gain little (if any) benefit and may even experience unjustified additional harm.
- On an organisational level, inefficiency could be represented by delivering elements of care in a highly specialised setting that could instead be provided at lower cost in the community, without compromising clinical outcomes and benefit for patients.

Background



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Tackling inefficiencies in the delivery and organisation of cancer care: a survey on how European cancer services innovate to better meet patients' needs and preferences and make health care systems sustainable

Interim report

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A survey on European Cancer Centres initiatives

- A questionnaire (in English) has been developed
- In collaboration with OECI and All.Can.
- A maximum of three innovative projects that have taken place in the organization in the period 2014-2018 or still ongoing

Section 1: general information

- Location
- Title of your innovative project (IP)
- Is your IP embedded in a broader national/regional/local programme, policy or action plan?
- Cancer patients to whom the IP was targeted
- Does your IP belong to one or more of the phases of cancer care trajectory?
 - Prevention and risk reduction
 - o Screening
 - o Diagnosis
 - o Treatment
 - o Survivorship
 - End-of-life care
 - Other (please specify):
- Problem addressed
- Could the causes of the problem be included in one or more of these types of inefficiency?
 - Unwarranted variation in clinical practice
 - o Overtreatment/overdiagnosis
 - Underuse of effective
 - o interventions/procedures
 - Provision of low-value care
 - o Mismatch between professional skills and patient's needs
 - Use of obsolete technologies/procedures
 - Lack of access to effective interventions/procedures
 - Low adherence to medication
 - Poor patient-doctor communication
 - Lack of multidisciplinarity in the provision of care
 - o Perverse incentives for providers/health professionals
- Departments/services in charge of the project
- Other Departments/services involved (if any)
- Timescale

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Now.....

We know what cancer centres are doing

 We would like to know what "should be done "from the perspective of the relevant stakeholders

 A consensus on key actions to be undertaken to increase value if the delivery of cancer care

- First step: identification of key stakeholders from different countries
- Health professionals
- Patients/caregivers
- Managers

Second step: item generation

Participants will be asked to state actions/initiatives they think are crucial to tackle the following issues

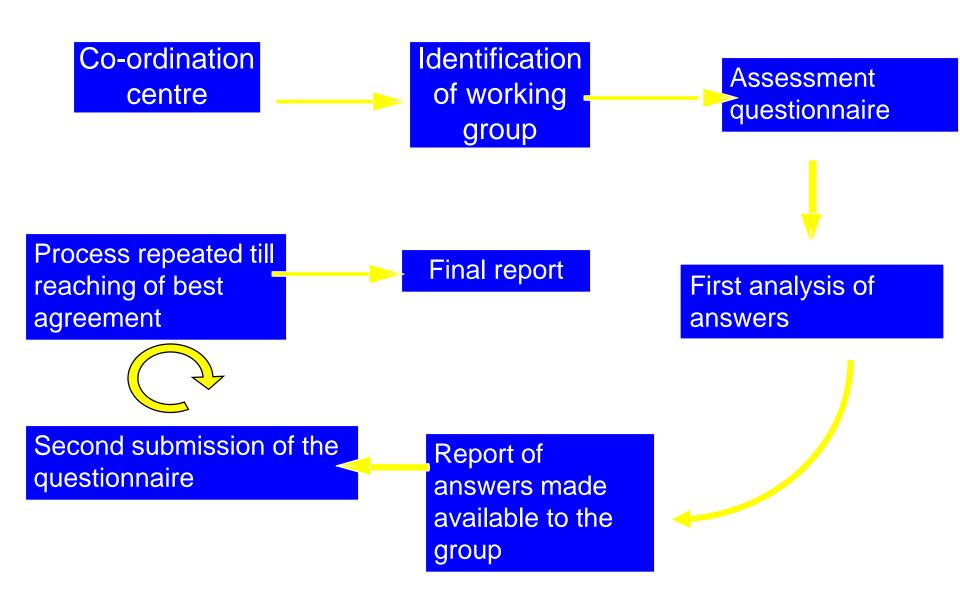
- Unwarranted variation in clinical practice
- Overtreatment/overdiagnosis/ provsion of low value care
- Underuse of effective interventions/procedures
- Mismatch between professional skills and patient's needs
- Use of obsolete technologies/procedures
- Low adherence to medication
- Poor patient-doctor communication
- Lack of multidisciplinarity in the provision of care
- Perverse incentives for providers/health professionals

Second step: item generation

Items proposed will be aggregated according to their level of application (i.e. clinical, institutional, system), and will represent the basis for the second step

Third step : Delphi methodology

HOW THE DELPHI METHOD WORKS



Third step: Delphi methodology

A questionnaire will be developed and circulated, presenting the final list of "actions proposed", and asking to what extent individual panelists agree with the statement that they actually represent key actions that need to be undertaken

What we are asking

- In each country, please identify
- Clinicians
- Managers
- Patients'/care givers' representatives

willing to partecipate

The goal is at least one for each category from each country

Send contact details to grillin@ausl.re.it