

# WP 9: Cancer Screening

Policy Conference – WP9 recommendations

European Guide on Quality Improvement in  
Comprehensive Cancer Control



**CanCon**  
Cancer Control Joint Action

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# Background

- EU Council recommends population-based cancer screening with quality assurance at all appropriate levels for breast, cervix & colorectal cancer
  - **EU Quality Assurance Guidelines**
- Most EU countries are planning, piloting or implementing population-based screening for these cancer sites
- There are, however, barriers; e.g. lack of monitoring and evaluation, and very low attendance in many programs; indicating a need for quality improvement

# Focus and main objective of WP9

- ✓ **Population-based cancer screening in the EU member states**
- ✓ **Guidance and principles for for governance, organisation and integrated evaluation of population-based cancer screening as a part of national cancer control policies**

# Chapter contributors

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- ✓ Altogether 14 associated partners involved in the work of WP9 from Belgium, Bulgaria, Croatia, Czech Republic, France, Finland, Italy, Latvia, Lithuania, Netherlands, Norway, Romania, Slovenia and Spain
- ✓ Around twenty collaborative partners and number of other experts

# Chapter methods

- **Efficacy and effectiveness of European cancer screening programs**
  - recent systematic reviews and European quality assurance guidelines, supplemented by conventional literature reviews
- **Implementation status**
  - reports and surveys such as EUNICE (2009), EuroScreen (2012), JRC (2014), EUSR (ongoing)
- **Governance**
  - conceptual framework for stewardship (WHO 2000)
  - survey in 34 EU/EFTA countries (cx screening)
- ✓ **Working Group meetings on governance, organization, evaluation and new screening programs (5)**

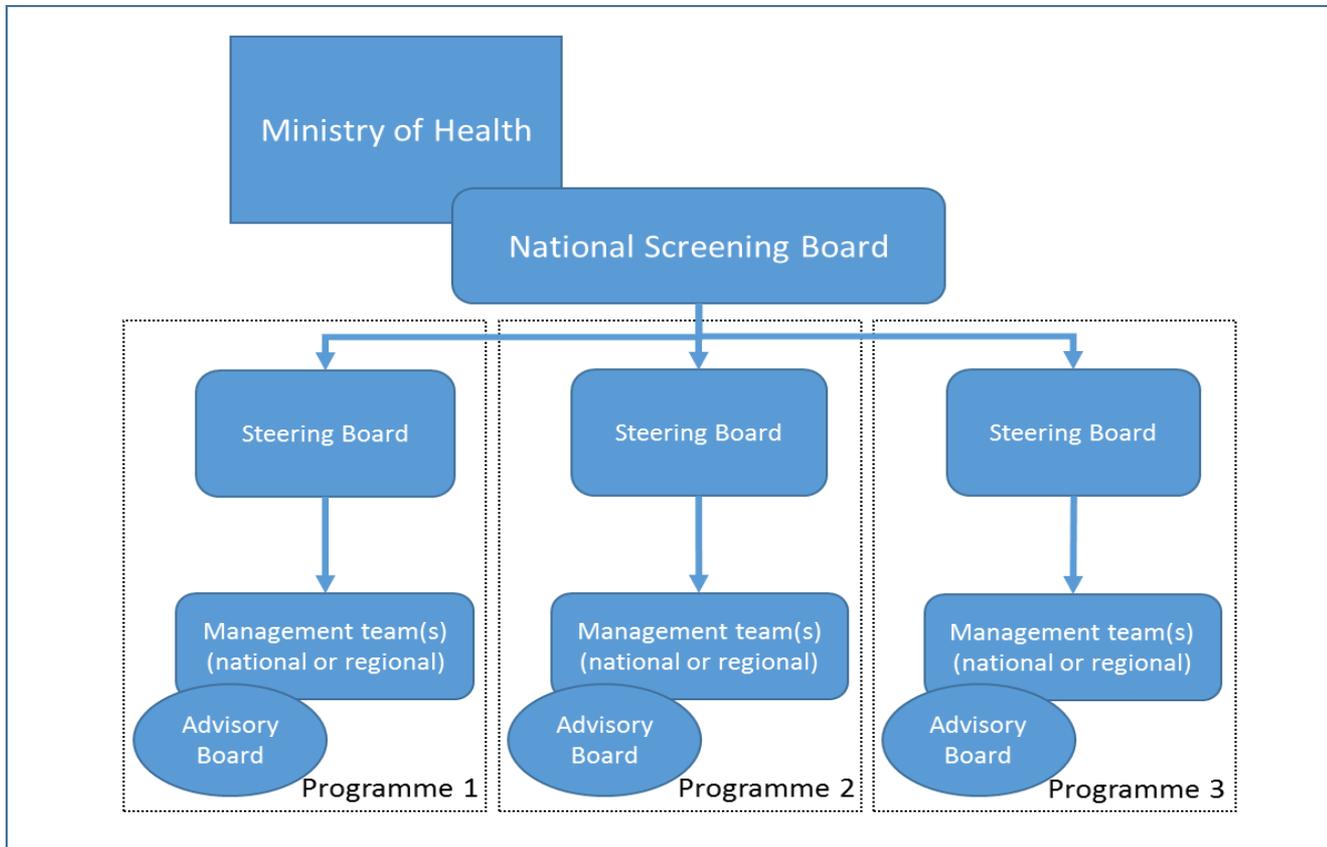
# Main messages

- Effective cancer screening requires a competent, multidisciplinary governance structure for sustainable implementation, modification (and cessation) of new and existing cancer screening programs
- Effective cancer screening requires legal framework, which enables mandatory notification and central registration of screening and outcome data, individual linkage to cancer and cause of death registers, and quality assurance including clinical and program audits
- ✓ **Effective cancer screening requires resources for quality assurance 10–20% of total expenditure**

## **Functions covered by the quality assurance allocation of 10-20% (European Guidelines for Quality Assurance in Cancer Screening)**

- Clinical and diagnostic quality management**
- Development and maintenance of population-based registration**
- Development, implementation and enforcement of a Quality Manual based on the European and national standards**
- Reporting of key performance indicators based on the European and national standards**
- Retrospective evaluation of programme effectiveness**
- Prospective evaluation of new screening methods, policies and organisational models**

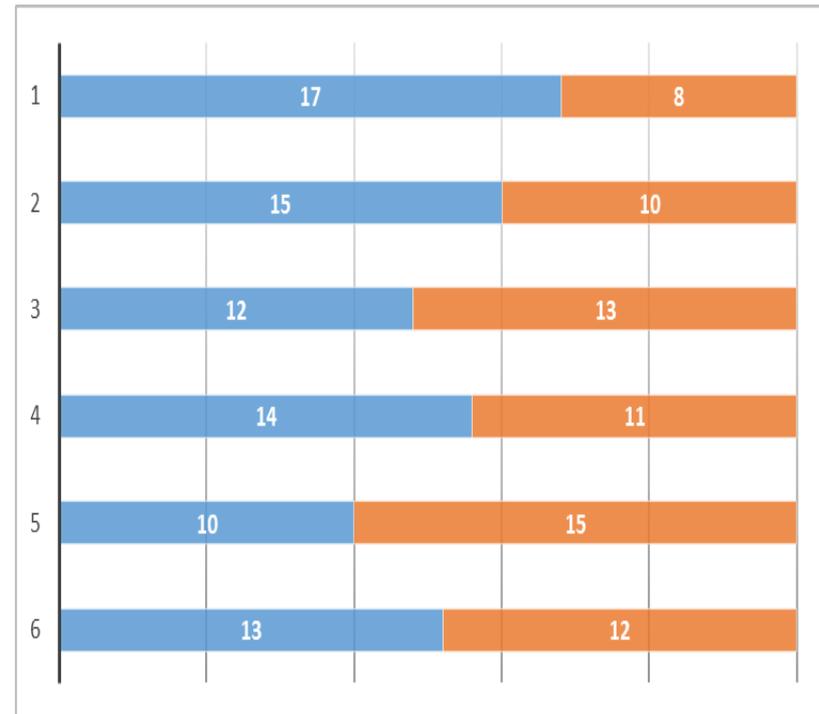
# Example of governance structures



**Policy-making; supervision, management, multidisciplinary feed-back**

# Survey on governance (cx screening, Majek & Lönnberg)

- National screening board
- Structured decision-making
- Steering board for programme
- Management team
- Advisory board
- Quality manual



# Other recommendations

- ✓ Implementation of cancer screening should be done in multiple steps through coordinated planning, piloting and roll-out
- ✓ Adequate mandate and resources are required for screening coordination, supervision and training, and computerised information systems for quality assurance and improvement
- ✓ Benefits and harms of screening need to be presented and clearly communicated to the general public
- ✓ Cost-effectiveness of screening should be evaluated prior to making any substantial changes or modifications
- ✓ Evaluation of equity should be integrated in the screening program
- ✓ Transition research should be launched "on spot" in a program where poor attendance or other serious barriers have been identified

## 1. Pre-planning

- Acquirement and synthesis of evidence
- Assessment of baseline conditions
- Prioritization
- Setting policy objectives and targets
- Creating communication strategy

## 2. Planning

- Establishing governance structure and legislation
- Establishing QA teams
- Developing IT and information systems
- Contracting local and regional teams
- Training staff and reference centers
- Establishing quality assurance protocols

## 3. Piloting

- (Randomized) evaluation of performance, logistics and outcome
- Training
- Reducing barriers and social inequalities
- Rollout, modification or stopping if indicated

## 4. National implementation

- Enlargement of organization
- Early evaluation of performance and outcome
- Communication
- Training
- Reducing barriers and social inequalities
- Modification or stopping if indicated

## 5. Running a full-scale program

- Long-term evaluation of performance and outcome
- Continuous communication
- Continuous training and quality improvement
- Prospective evaluation of new methods
- Stopping if no more effective

**Thank You!**