# Efficiency and sustainability in innovative patient centred cancer care

### Memorandum All.Can Belgium

14/03/2019

All.Can is a multi-stakeholder platform established to create political and public engagement on the need to improve the efficiency of cancer care. To do this, it focuses on what matters most to patients, and makes sure resources are targeted towards achieving these outcomes. All publications reflect the consensus of members, who hold full editorial control.



All.Can Belgium recognizes that **impressive progress** has been made in the field of cancer care leading both to better treatment of cancer patients and to higher survival rates. At the same time, more people are diagnosed with cancer each year. Together, this leads to an increasing demand for **better cancer care** beyond cancer treatment.

Patients have an active role to play in the development and delivery of cancer care. In addition, **innovations** in oncology are becoming rapidly available with more to come such as predictive diagnosing, the use of biomarkers, precision and personalized medication, gene and cell therapy (advanced therapeutic medicine), high tech surgery and radiotherapy, big data and real-world data, virtual reality or augmented reality supported tools, patient at home care, and others.

These drivers are challenging our health care system. All.Can's ambition is to combine **sustainability**, accessibility and patient centricity into the health care system; and bring this ambition high on the policy agenda for better patient outcomes.

One of the ways forward is to create **more efficiency** in the cancer care system. All.Can Belgium aims for the better use and allocation of available resources in cancer care. Together with all stakeholders we should identify and **reduce waste**, seek how to achieve more with the time and money available, and address unmet medical needs. We believe innovation is a powerful instrument in creating greater efficiency and improving patient outcomes.

Optimising cancer care requires firm and **collaborative actions** across the whole cancer care continuum. All.Can Belgium presents the following key steps in such an approach.



### Overview of All.Can Belgium's key asks

### 1. All.Can Ask 01

Across all aspects of cancer care we must ensure that we are focusing on what matters most to patients

### 2. All.Can Ask 02

Work together to (re)design tools to inform and navigate patients and professionals in the fast-evolving cancer care environment

### 3. All.Can Ask 03

Build cancer care and support based on an understanding of the needs of patients and their relatives. Medical and non-medical follow-up should focus on doing what is needed with a minimal burden for the patient

### 4. All.Can Ask 04

Create a map of the Belgian cancer ecosystem that is understandable for a large audience and highlights where collaboration should be improved

### 5. All.Can Ask 05

Reinforce the Belgian Cancer Registry to build a strong cancer data system that is aligned with the overall health care data system

### 6. All.Can Ask 06

Belgian policymakers should develop a new cross-functional cancer roadmap with a vision on sustainable and innovative cancer care

### 7. All.Can Ask 07

We believe in prevent rather than cure by the "Health in all policies" principle. Reduce the life-style related risk factors of cancer

### 8. All.Can Ask 08

Find the right balance between "too much" and "not enough" in screening programmes and diagnosis of cancer

### 9. All.Can Ask 09

Give all patients when relevant access to game changing innovations to ensure effective and efficient treatment; and secure a reasonable growth in cancer care spending

### 10. All.Can Ask 10

We recommend multistakeholder dialogue as a constructive and effective way of mobilising the cancer care community and truely involve stakeholders in policy and decision making

Each of the asks is explained below. A more detailed reading can be found in All.Can Belgium's vision document available online (www.all-can.org/belgium).

### Patient centricity and patient empowerment

1 All.Can Ask 01: Across all aspects of cancer care we must ensure that we are focusing on what matters most to patients

Patient-relevant outcomes should be placed at the heart of everything we do by including patients and their representatives in all aspects of cancer care development, policy making, planning, delivery, and evaluation. We should develop a clear understanding of patient's perspectives and experiences; more specifically what quality of life really means for patients and their relatives. Patient representatives should always be in the forefront of the Belgian cancer care system. More needs to be done to empower patients and to make sure they have a real voice, a voice that is heard and listened to.

Patient representatives, patient organisations, patient education initiatives (e.g. Eupati) and civil society initiatives (e.g. KBS) are key partners in this field.

Let us better understand what really matters to patients when assessing the treatment options; and respect their choice.

2 All.Can Ask 02: Work together to (re)design tools to inform and navigate patients and professionals in the fast-evolving cancer care environment

Cancer is a complex and rapidly evolving disease area: there are different causes, different types of cancer, different phases in the development of the disease, different incidence rates of different cancer types, different treatment options, a high amount of research and development, and a wide range of stakeholders involved. This makes it difficult to get a good overview of what information is relevant and of the latest developments. It also increases the risk of suboptimal choices. Although excellent information

platforms already exist, there is still an information gap. Validated cancer navigation tools with reliable, understandable, state-of-the-art, comprehensive information can act as a central starting point for information not only for the benefit of patients and their relatives but also for health care professionals and policy makers. The Choosing Wisely campaign is an information initiative that seeks to advance national dialogue and avoid unnecessary tests, treatments and procedures.

3 All.Can Ask 03: Build cancer care and support based on an understanding of the needs of patients and their relatives. Medical and non-medical follow-up should focus on doing what is needed with a minimal burden for the patient

There will be more need for **cancer care and support** at each stage of the disease and after the disease because there will be more cancer patients and survivors across different age groups. Invest in more research to understand the type and scale of cancer care and support needed and develop cancer support programmes that complement existing health programmes.

Efficiency in the **medical follow up** of cancer patients can be improved. Include best practice in protocols / clinical pathways to, for example, inform what scans and tests to use in which circumstances, and identify what are highly useful and less useful combinations of tests, scans and, consultations. It is also important to consider what kind of medical follow-up is needed and by whom it should be performed (first line or second line).

Rehabilitation, revalidation, reintegration at work, physical activity and social and psychological support (non-medical follow up) should be key in a patient-centred approach.

# Across all aspects of cancer care we must ensure that we are focusing on what matters most to patients

### 5)5)

## The cancer ecosystem

4 All.Can Ask 04: Create a map of the Belgian cancer ecosystem that is understandable for a large audience and highlights where collaboration should be improved

A wide range of stakeholders play a role in the development and delivery of cancer care. In this complex landscape potential sources of waste are created by the division of healthcare competences across different policy levels, duplication of efforts, competition for funding, unknown gaps, and fragmentation.

To counter this, start with a comprehensive organisational mapping explaining who does what in the Belgian cancer care system in a clear way for a large audience. Reflect on the different structures and collaboration mechanisms and on how they can be improved or simplified where possible.

Present it at a national inter-ministerial conference including the nine responsible ministers of health care. This can be the starting point for a more coordinated collaboration between all stakeholders across the cancer pathway, for example by means of annual task forces or working groups. It will help to establish a stronger coordination of Belgian cancer care.

5 All.Can Ask 05: Reinforce the Belgian Cancer Registry to build a strong cancer data system that is aligned with the overall health care data system

Evidence-based policy-making requires an adequate cancer data system. Moving forward in the cancer data system will improve insight in cancer care performance and help to reduce variability of cancer care where needed.

More and more data are available, but are sometimes fragmented across different sources, not shared, not easily accessible, with a time lag, unexploited for policy and research purposes (e.g. preclinical data, clinical records, clinical trial data). Therefore, further enhancing the Belgian cancer data system will be necessary. However, it should be integrated and aligned with the overall health care data system. **The Belgian Cancer Registry**, internationally recognised for its work, can play a central role in the further development as reference centre for cancer data. An example is a pilot project on registration of innovative radiotherapy.

# Sustainable and innovative policy

6 All.Can Ask 06: Belgian policymakers should develop a new cross-functional cancer roadmap with a vision on sustainable and innovative cancer care

Considering both the overall positive impact of the national cancer plan of 2008 and the challenges for cancer care ahead of us we believe there is a need to create a new national **cancer care vision (Roadmap)** on what effective, efficient, innovative and sustainable cancer care would look like, what the guiding principles are; and what the steps are towards reaching this vision.

This vision should be developed in dialogue with caregivers, patient advocacy groups and other stakeholders. It should consider the results and lessons learned from the first national cancer plan, from a performance analysis of the Belgian cancer care system; and cancer trends and forecasts. It should also consider how tasks can be divided and coordinated in the complex cancer landscape.

7 All.Can Ask 07: We believe in prevent rather than cure by the "Health in all policies" principle. Reduce the life-style related risk factors of cancer

The most effective and efficient cancer action is prevention. About a third of all cancers can be prevented, according to World Health Organization estimates, by proactive approaches such as the "Health in all policies" principle.

Several **lifestyle-related factors** strongly affect individuals' risk of cancer. Many of the actions and lifestyle changes needed to reduce the risk of cancer would also prevent other serious disease states such as cardiovascular disease and lung disease. In addition, a healthy lifestyle would also have a positive effect on cancer treatment.

Individuals are responsible for their lifestyle, although not all responsibility lies with the individual. There is a **shared responsibility** between citizens (life-style, adherence to vaccination), industry (healthier food products, health & safety at work) and policy-makers (preventive health programmes, health literacy). Motivation techniques stimulate people in a positive way to adjust their behaviour (nudging). Examples include colour codes on food, taxation on tobacco.

Reflect on the advantages or disadvantages of innovations such as genome sequencing as primary prevention.

8 All.Can Ask 08: Find the right balance between "too much" and "not enough" in screening programmes and diagnosis of cancer

The purpose of adequate screening programmes is to detect cancers in an early phase. Currently, screening suffers both from over- and under-participation. Stop or change screenings that are not cost-effective. We recommend investing in targeted screening based on risk assessment: the better the population at risk is reached, the more efficiently resources can be used. New technologies will enable the move towards stratified screening by using different or biomarkers.

Diagnosis of cancer should be accurate and timely, and followed up rigorously. Stimulate health care professionals to have enough knowledge on symptoms and to refer adequately to reference centres or specialists. Stimulate patients to come back after a first diagnosis. Promote alternative strategies such as "watch and wait" as valuable options where relevant (e.g. prostate cancer).

# We recommend multistakeholder dialogue as a constructive and effective way of mobilising the cancer care community

9 All.Can Ask 09: Give all patients when relevant access to game changing innovations to ensure effective and efficient treatment; and secure a reasonable growth in cancer care spending

Efficiency gains can be found in the different steps of cancer treatment, and innovations and new technologies should be used optimally to help achieving them.

Selectivity in treatment is a promising approach to avoid waste in cancer treatment: most cancer medication only works for a strictly defined population, making 'general treatment' inefficient. Focus on stratified and precision or personalised medicine. Consider more centralised investments where possible.

Reduce variability in care and make use of benchmarking results between different cancer centres. Improve alignment and collaboration through better communication and information exchange between the hospital team and the patient and his/her carers at home. Digital tools can support this.

It is important to secure a **reasonable growth in cancer care spending**. Promote fast take up of better and/ or cheaper treatment options. Make sure that regulatory evaluation and approval frameworks enable timely access to innovation, and that decisions are based on comprehensive assessments of benefits and costs. In order to grant the necessary access to the newest cancer innovations and to safeguard the sustainability of the health care budget, we will have to take into consideration new financing models as there are pay-for-performance, multi-indication pricing.

10 All.Can Ask 10: We recommend multistakeholder dialogue as a constructive and effective way of mobilising the cancer care community and truely involve stakeholders in policy and decision making

As mentioned before, All.Can's ambition is to combine sustainability, accessibility and patient centricity into the health care system. We believe that this can only be achieved through **collaborative efforts from multiple perspectives**. Members of All.Can Belgium include patient and hospital representatives, healthcare professionals, health payers/insurers, industry representatives, health experts and other stakeholders committed to cancer care. By bringing together all relevant perspectives, the All. Can multi-stakeholder group is well placed to identify the issues, develop potential solutions and engage in a discussion to generate change.

We recommend **multistakeholder dialogue** as a constructive and effective way of mobilising the cancer care community and truely involve stakeholders in policy and decision making.

All.Can is a multi-stakeholder platform established to create political and public engagement on the need to improve the efficiency of cancer care. The All.Can Belgium initiative is made possible with financial support from Bristol-Myers Squibb (main founding and funding partner), MSD Belgium (main founding and funding partner) and Roche (funding partner). The secretariat of All.Can Belgium is provided by hict.

Secretariat All.Can Belgium p/a hict Ottergemsesteenweg-Zuid 808 B/354 B-9000 Gent info@all-can.be www.all-can.org/belgium





