Reflections from Northern Ireland

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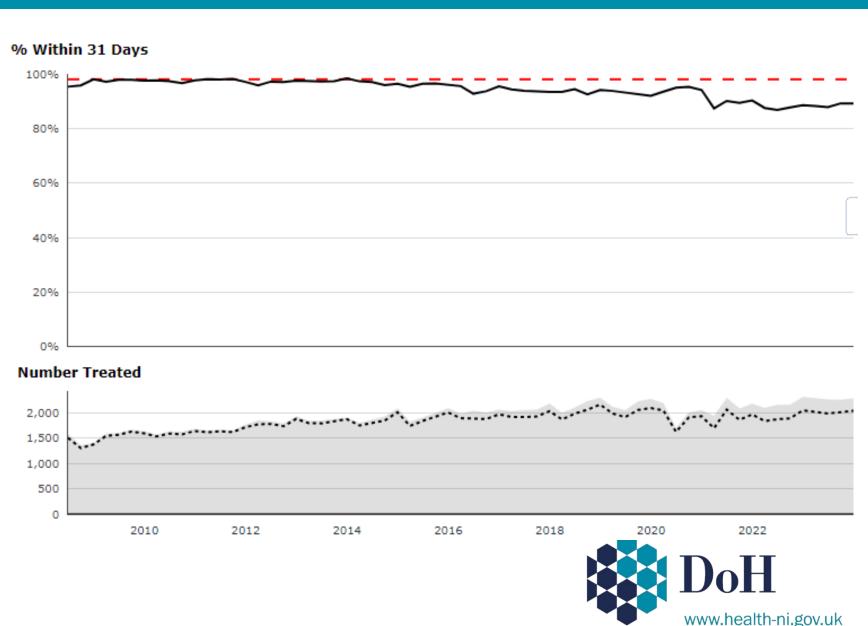


31 and 62 day target

Treatment commencing within **31 days** of decision to treat.

Target: 98%

December 23: 89%

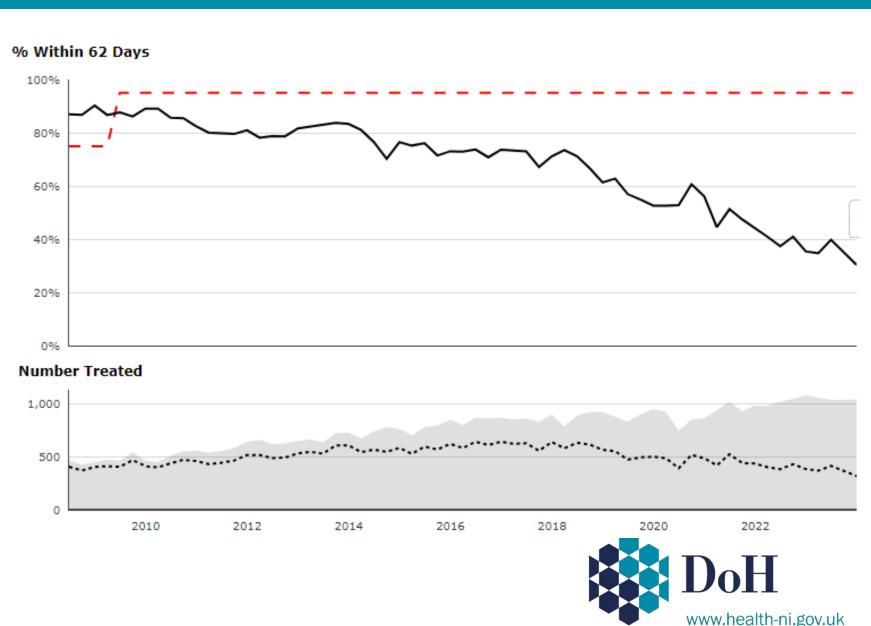


31 and 62 day target

Treatment commencing within **62 days** of GP referral for suspected cancer.

Target: 95%

December 23: 30%



Cancer Strategy 2022-2032



Cancer Strategy published 22 March 2022

Theme 2: Diagnosing and Treating Cancer

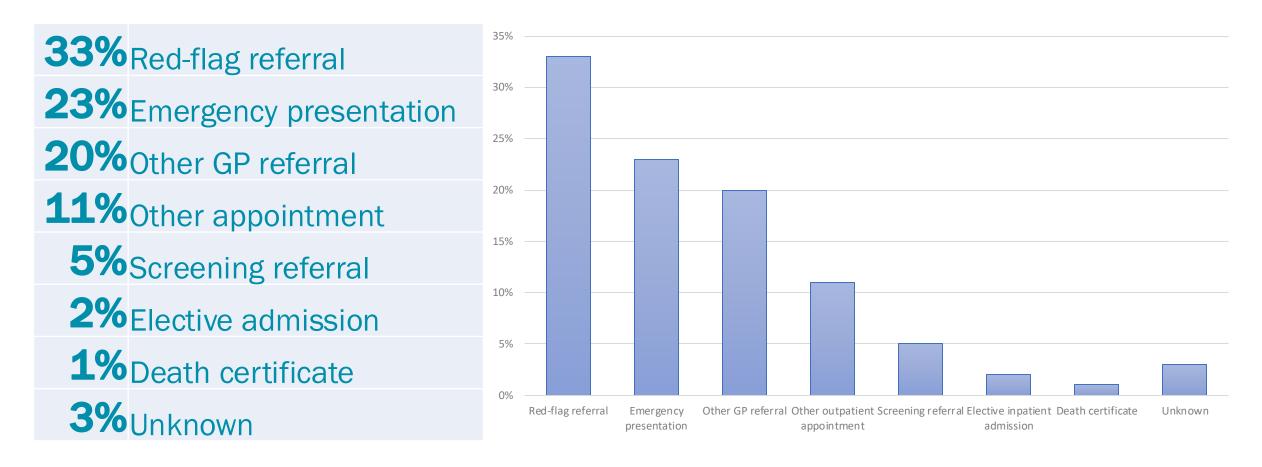
• 12 actions relating to diagnosing cancer (actions 5-16)

Includes actions to improve:

- Routes to diagnosis
- Awareness campaigns
- Screening programmes
- Reviewing targets
- New pathways and services



Routes to diagnosis - high level

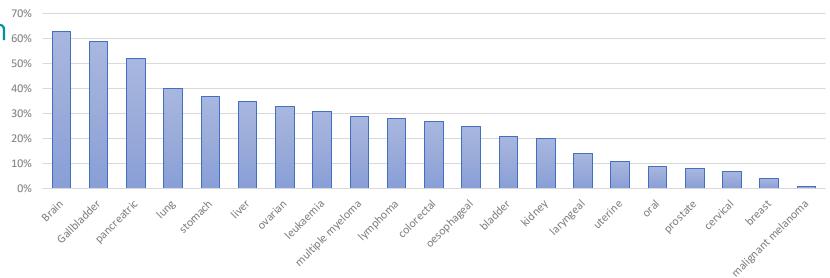


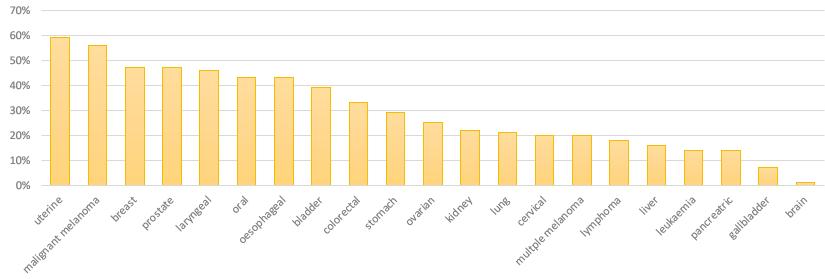


Routes to diagnosis - other data

Emergency presentation route to diagnosis

Brain 63% →
Malignant melanoma 1%





Red Flag

route to diagnosis

Uterine 63% → Brain 1%

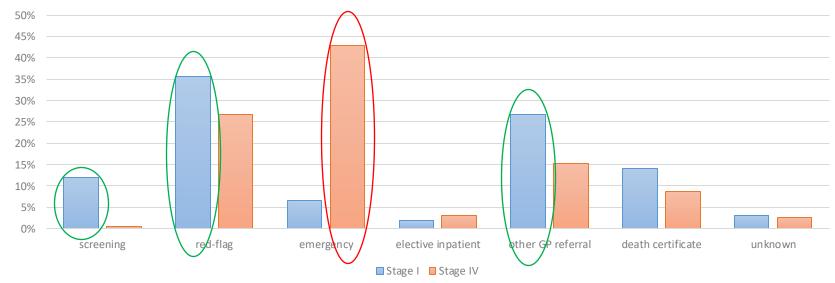


Routes to diagnosis - other data

Age at diagnosis Route to diagnosis

75+: 32% emergency



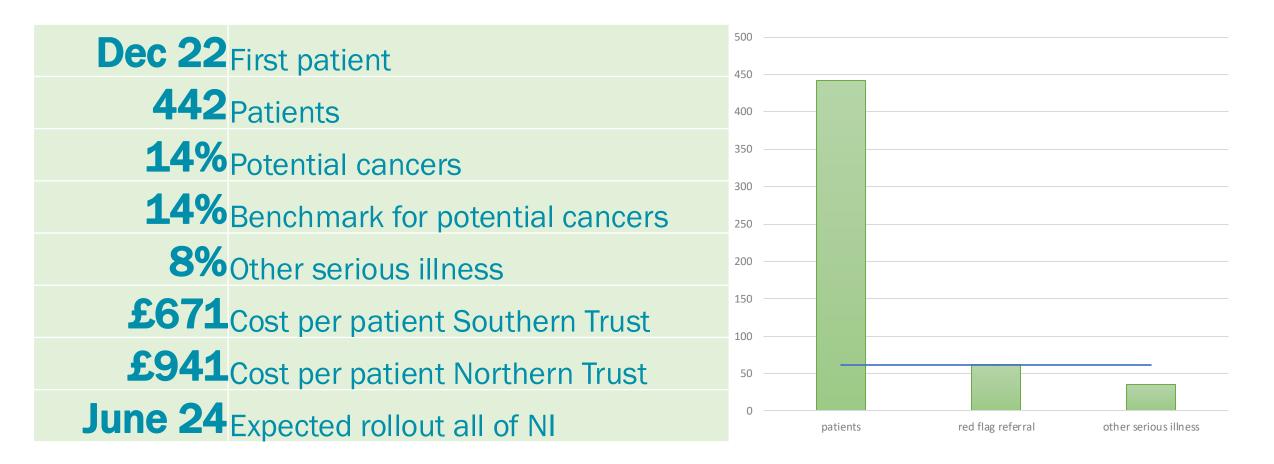


Stage at diagnosis Route to diagnosis

Stage I: screening 12%, red flag 36%, other 27% Stage IV: emergency 43%

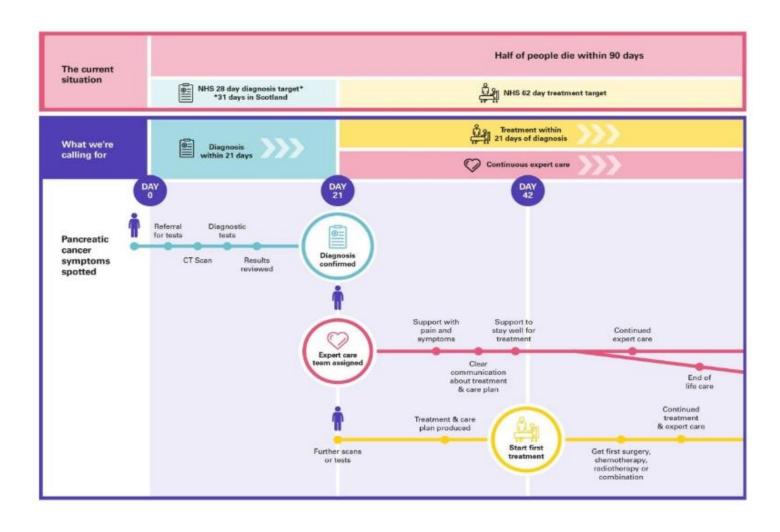
www.health-ni.gov.uk

Rapid Diagnosis Centres





Pancreatic Cancer Pathways



Collaboration

- Pancreatic Cancer UK
- NIPANC
- HSC Trusts
- Department of Health

Result

- **→** Optimal Care Pathway
- → Quicker diagnosis



Genomics

Action 27 Implement genomics testing for all cancers in Northern Ireland

£1.4m funding to allow genomics testing to scale up

of predisposition to inherited **Identification** cancers expected to reduce diagnosis times



Conclusion

Challenges

- Stable decision making
- Funding

Opportunities

- Cancer Strategy
- Dedicated workforce
- Innovation that is underway

A Cancer Strategy for Northern Ireland 2022-2032





