

## Case Study

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# Supporting an ICS to reduce inequities within breast cancer

## Background

Breast cancer is the most common cancer among females in the UK, with around 55,000 new cases every year and 11,500 deaths. 23% of these cases are preventable, but how and when a patient seeks help or treatment can be affected by many different factors. These can include socioeconomic factors and a patient's age, religion, or ethnicity.

It is therefore essential to combine metrics and apply a wider support mechanism across communities to ensure that individuals get the care they need when they need it.

When looking at the disease, the highest admissions of breast cancer from 2016-2022 were seen in Lancashire and Cumbria, with these patients being white British women between the ages of 45-75.\* Further research shows these counties have some of the highest poverty rates in the UK.\*\*

## The Scenario

A data dashboard was developed to support NHS Partnership Managers at a large Pharma company to provide their Real World Data (RWD) insights to their customer to reduce inequities in breast cancer care.

## The Challenges & Objectives

The large Pharma company wanted to build a relationship within Integrated Care Systems (ICSs), specifically ICS X. The objective was to support ICS X on their mission to improve patient outcomes, equalizing patient care and help elective oncology care return to post COVID-19 volumes.

As well as this, the company wanted to support the ICS's specific challenge around inequalities within breast cancer and to meet their objective to improve demographic data collection.

\*using code C50 in the Vantage platform,

\*\*Cumbria.gov.uk & Lancashire.gov.uk

## The Solution

Utilizing Hospital Episode Statistics (HES) Data and Vantage's storytelling solution, Storyboard, an ICS-focused dashboard was built for our Pharma client. This brought together multiple datasets to support the Breast Cancer Oncology Team, including reducing disproportionate waiting times by ethnicity.

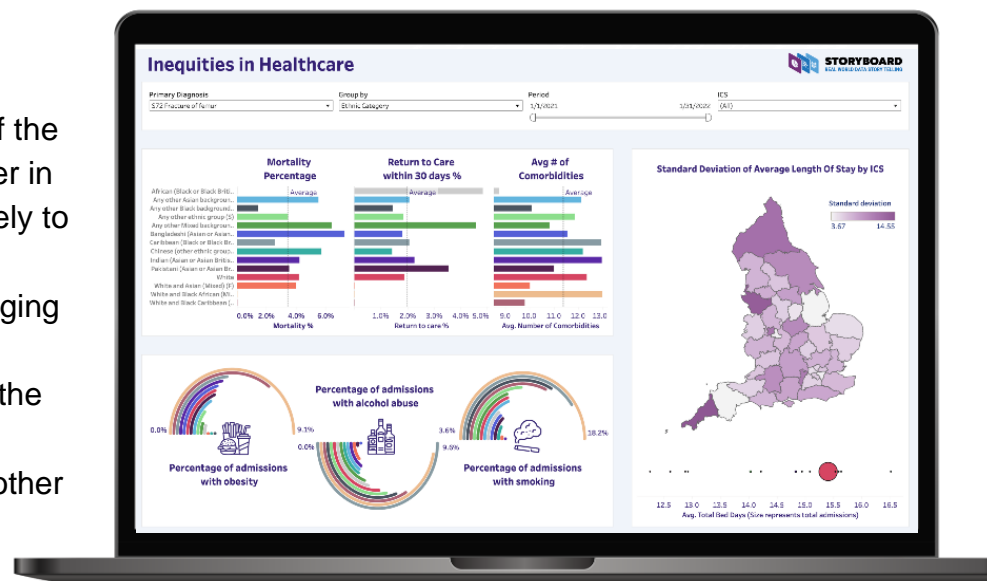
HES metrics such as age, ethnicity and IMD Deprivation Scores (including income deprivation), enabled the ICS's activity to be looked at using Real World Evidence (RWE).

Building in outcome metrics helped to understand if specific patient groups within the ICS were more likely to have more non-electives (NELs), higher length of stays or higher rates of mortality.

The interactive dashboard allowed for easy analysis of these different patient segments to demonstrate how their outcome metrics changed. The downloadable data visualisation made for easy communication between our client and their stakeholders at the ICS.

## The Findings

The most deprived 0-10% of the population with breast cancer in the ICS locality are more likely to attend hospital through NEL means. Patients were averaging around six additional comorbidities and 16.3% of the patients were smokers, the highest in proportion to the other IMD deciles.



## The Outcome

Vantage Storyboard supported the large Pharma company in their conversations with their stakeholders to help them understand the specific challenges affecting their local ICS landscape. This included analyzing 2-week urgent cancer referrals by ethnicity to identify the 'unknown gaps'. Highlighting these helped to support the NHS's long-term goals in reducing inequities with specific diseases.

The Vantage dashboard provided insight through secondary care activity to support the reduction in inequalities. The update of data every month also allowed for the monitoring of trends and the support of the reduction in health inequities over time.

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