 

**Reeth medical centre**

**Annual Cancer Profile**

**Data Summary**

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# Part 1: Cancer profile data presentation

## Demographics

**Practice population: approx. 1,608 (lower than CCG and England average)**

In 2017, 31.8% of the practice population were aged 65 or over, which is **statistically higher than** the CCG average of (25.1%). There is known positive correlation between age and increase risk of developing some cancers.

Practice is in **4th less deprived decile** according to the IMD 2015 (1 = most deprived, 10 = most affluent) with a score of 16.5 (CCG 14.5, England 21.8)

Ethnicity estimate is 2.0% non-white ethnic groups

**New cancer cases** **2014/15** (count 9 – 569 per 100k population which is just statistically **similar to** the CCG average (666 per 100k population). (*The number of persons diagnosed with any invasive cancer excluding non-melanoma skin cancer, multiplied by 100,000 and divided by the practice list)*

**QOF cancer prevalence** stood at 3.6% for 2016/17 which is **statistically** **similar to** the CCG average of (3.5%). The England average of 2.6%. This is trending upwards.

## Screening

**Breast screening:** Breast screening uptake 2016/17 for take up of invitation within 6 months of invitation stood at 89.5%, which was statistically **similar to** the CCG average (81.5%).[[1]](#footnote-1)

**Breast screening (3year coverage):** Breast screening uptake 2016/17 3year coverage stood at 65.9%, which wasstatistically **lower than** the CCG average of 75.9% and **below national target of 80%.** [[2]](#footnote-2)

**Cervical Screening:** uptake 2016/17, stood 76.6% which was statistically **similar to** the CCG average (78.5%), statistically **higher than** the England average was 72.1% and **below the national target 80%.**

**Bowel Screening:** Bowel screening uptake 2016/17, for take up of invitation within 6 months of invitation stood at 67.6% which is **similar to** the CCG average of 64.0%.

**Bowel Screening (2.5year coverage):** Bowel screening uptake 2015/16, 2.5 year coverage stood at 64.3% which was statistically **similar to** the CCG average of 64.7% and above the England average of 57.5%.**[[3]](#footnote-3)**  **The national target is 60%.**

## Presentation & Assessment

**Two week wait referrals for suspected cancer (2016/17)** were statistically **higher than** the CCG average. The number of referrals stood at **87** (practice rates/100,000 35410 CCG 3636).

**The 2ww cancer conversion rate 8.0%** was statistically **similar to** the CCG average at 9.8%.

**Detection** - The percentage of new cancers treated, diagnosed via two week wait referral, stood 69.2%, which was just **statistically similar to** the CCG average (55.1%).

**The number of emergency presentations** 2016/17 were not recorded, number is between 0 and 5. The CCG average value 110/1000,000.

**The number of emergency admissions** with cancer was statistically **similar to** the CCG average, practice count 7 (practice value 435), CCG average value 763.

# Appendix.

**Variation by practice 2016/17 HRW CCG. Light blue above CCG yellow- similar to the CCG and dark blue below CCG**

**Breast Screening Coverage by GP Practice (Females aged 50-70 screened for breast cancer in last 36 months)**

 

**Cervical Screening Coverage by GP Practice - (Females aged 25-64 screened for cervical cancer in last 42/66 months)**



**Bowel Screening Coverage by GP Practice - (Persons aged 60-69 screened for bowel cancer in last 30 months)**



1. 1-year screening uptake %: the number of females registered to the practice aged 50-70 invited for screening in the previous 12 months who were screened within 6 months of invitation divided by the total number of females aged 50-70 invited for screening in the previous 12 months. [↑](#footnote-ref-1)
2. 3-year screening coverage %: The number of females registered to the practice screened adequately in previous 36 months divided by the number of eligible females on last day of the review period. [↑](#footnote-ref-2)
3. 2.5-year screening coverage %: The number of persons registered to the practice screened adequately in the previous 30 months divided by the number of eligible persons on last day of the review period. [↑](#footnote-ref-3)