




Prostate cancer, inequalities and the NHS

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*“Exceptional quality
healthcare for all
through equitable access,
excellent experience and
optimal outcomes”*

REDUCING HEALTHCARE INEQUALITIES

CORE20

The most deprived **20%** of the national population as identified by the Index of Multiple Deprivation



20%

The **Core20PLUS5** approach is designed to support Integrated Care Systems to drive targeted action in healthcare inequalities improvement

Target population

PLUS

ICS-chosen population groups experiencing poorer-than-average health access, experience and/or outcomes, who may not be captured within the Core20 alone and would benefit from a tailored healthcare approach e.g. inclusion health groups



CORE20 PLUS 5

Key clinical areas of health inequalities

1



MATERNITY

ensuring continuity of care for women from Black, Asian and minority ethnic communities and from the most deprived groups

2



SEVERE MENTAL ILLNESS (SMI)

ensuring annual health checks for **60%** of those living with SMI (bringing SMI in line with the success seen in Learning Disabilities)

3



CHRONIC RESPIRATORY DISEASE

a clear focus on Chronic Obstructive Pulmonary Disease (COPD), driving up uptake of Covid, Flu and Pneumonia vaccines to reduce infective exacerbations and emergency hospital admissions due to those exacerbations

4



EARLY CANCER DIAGNOSIS

75% of cases diagnosed at stage 1 or 2 by 2028

5



HYPERTENSION CASE-FINDING

and optimal management and lipid optimal management



SMOKING CESSATION

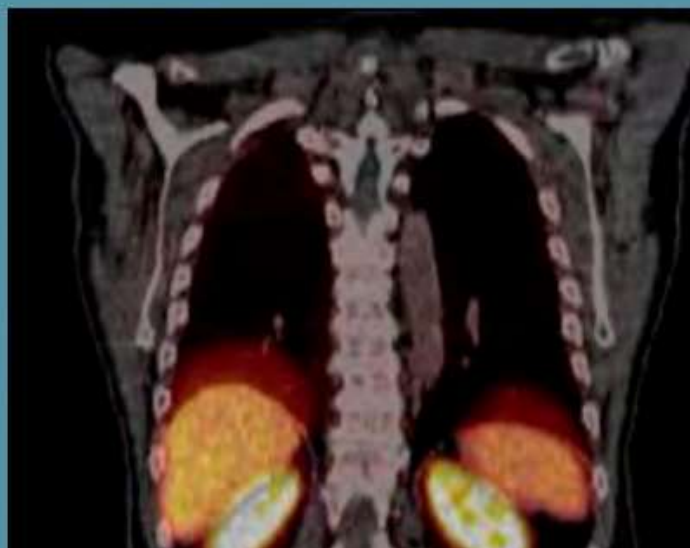
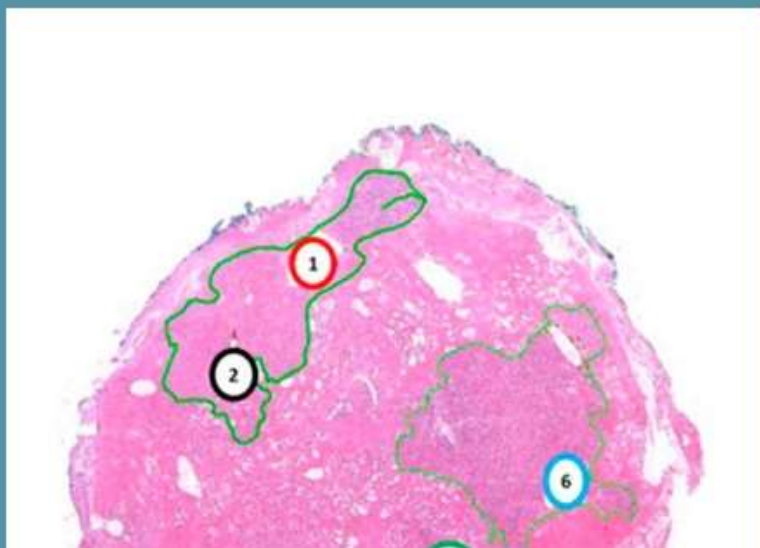
positively impacts all 5 key clinical areas



National Prostate Cancer Audit State of the Nation Report

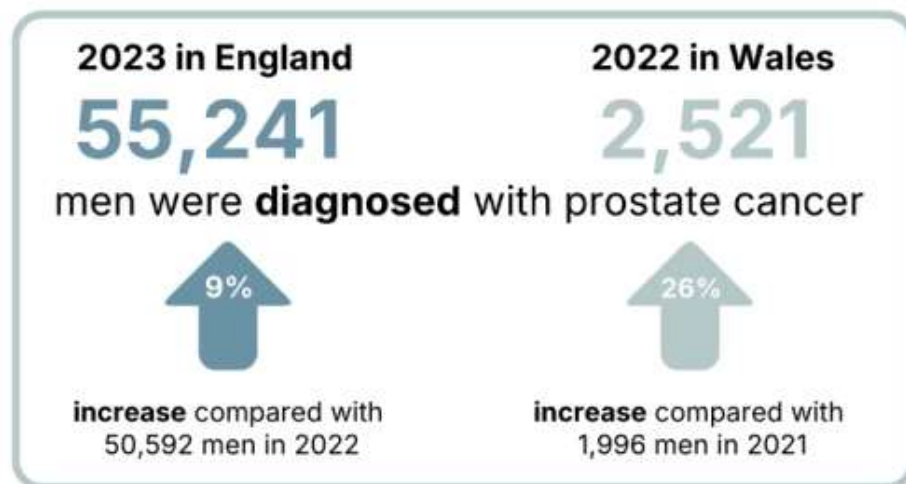
An audit of the care received by men diagnosed with prostate cancer in England and Wales from 01/01/2019 to 31/12/2023

Published January 2025



Infographic for England and Wales

Diagnosis & staging



Disease presentation

For men diagnosed between January - December 2021 in England and between April 2022 - March 2023 in Wales

17%^E of men presented with **metastatic** disease in England (E) and Wales (W)
19%^W

Figure 3. Annual number of men newly diagnosed with prostate cancer by age-ethnicity-deprivation group
Data for England from 1st January 2021 to 31st December 2023¹¹.

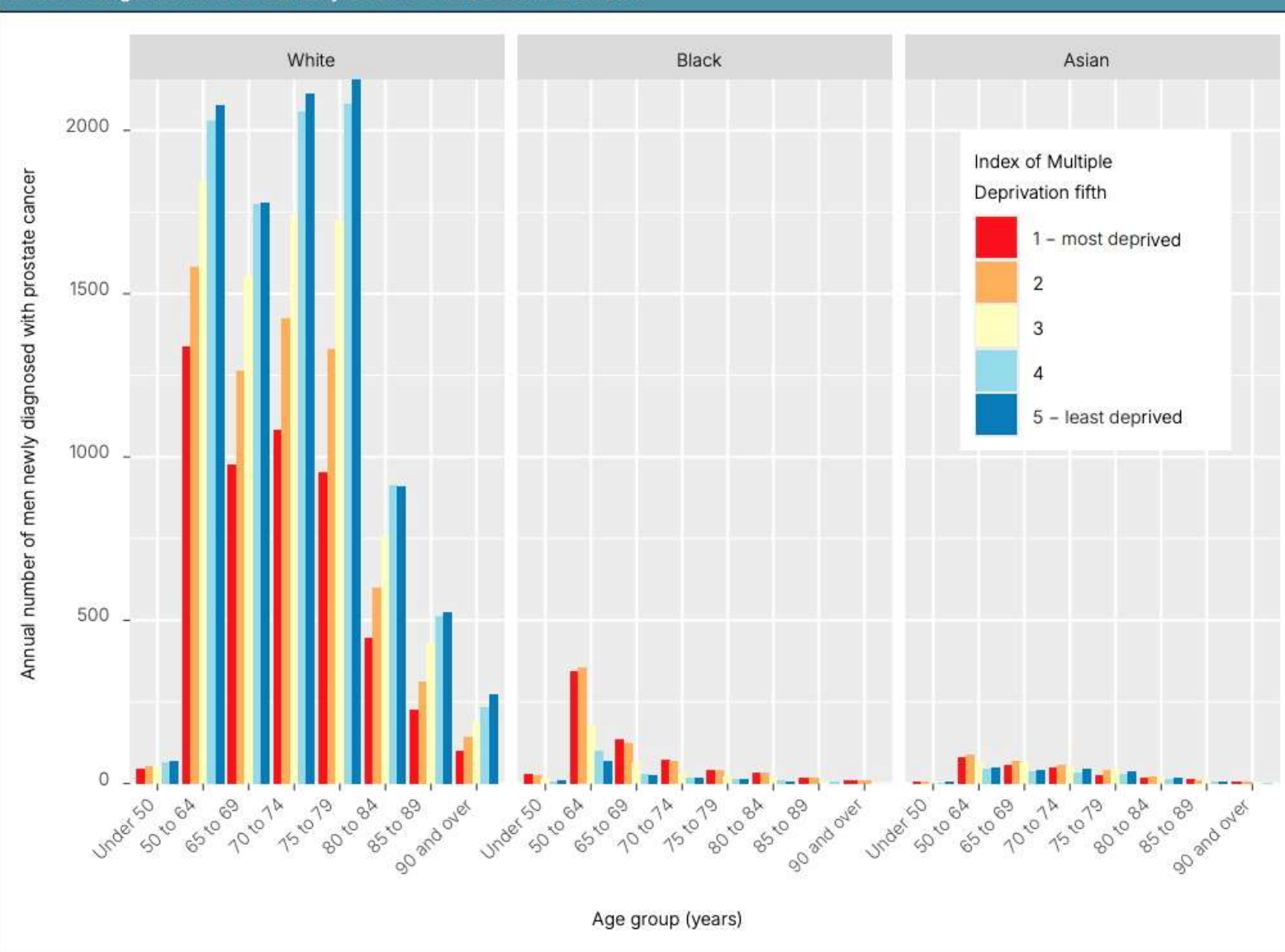
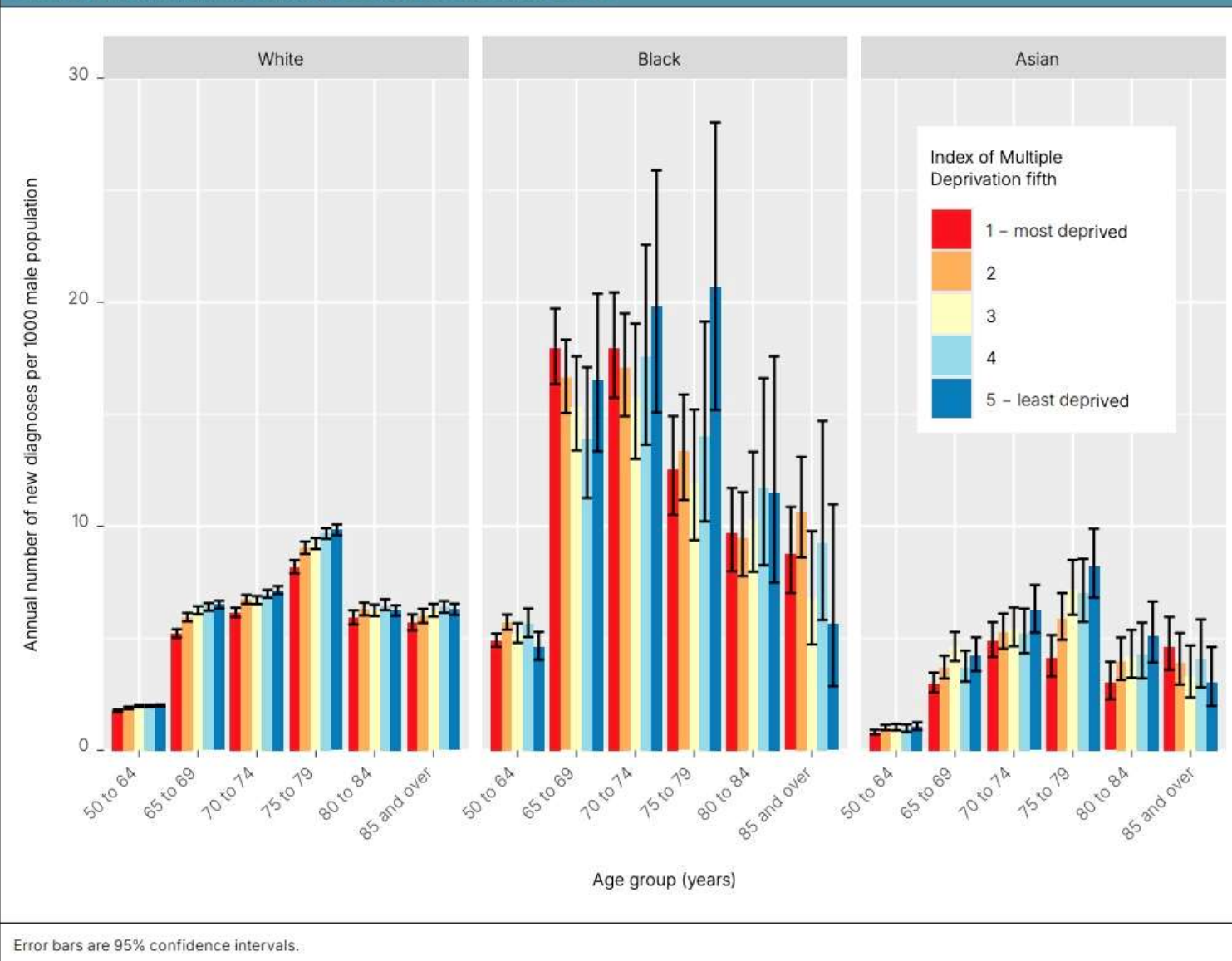
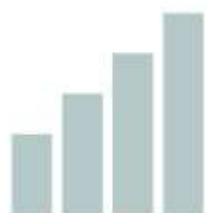


Figure 4. Annual number of new diagnoses per 1000 male population by age-ethnicity-deprivation group
Data for England from 1st January 2021 to 31st December 2023¹².



Diagnosis and treatment by age-ethnicity-deprivation

For men diagnosed between January 2021 - December 2023 in England



9 out of 10
diagnoses
were in
white men

Across all age groups **over 50 years**, **black populations** had **more diagnoses** per 1000 men **than other ethnicities**



White men **≥85 years** were more often diagnosed with **stage 4 cancer** than younger groups

Men living in **more deprived areas** and **black men** were **less likely to receive radical treatment** for high-risk/locally advanced disease

Treatment allocation

For men diagnosed between January - December 2021 in England and between April 2022 - March 2023 in Wales

Low-risk*, localised
disease



High-risk/locally
advanced disease



of men had radical treatments in
England (E) and Wales (W)

*Low-risk: T stage 1/2, Gleason ≤6, M/N 0 or missing = CPG1

Treatment outcomes

For men undergoing surgery between April 2022 - March 2023 in England and Wales



of men were **readmitted** within 3 months
following surgery



For men undergoing radical treatment between September 2020 - August 2021 in England and Wales

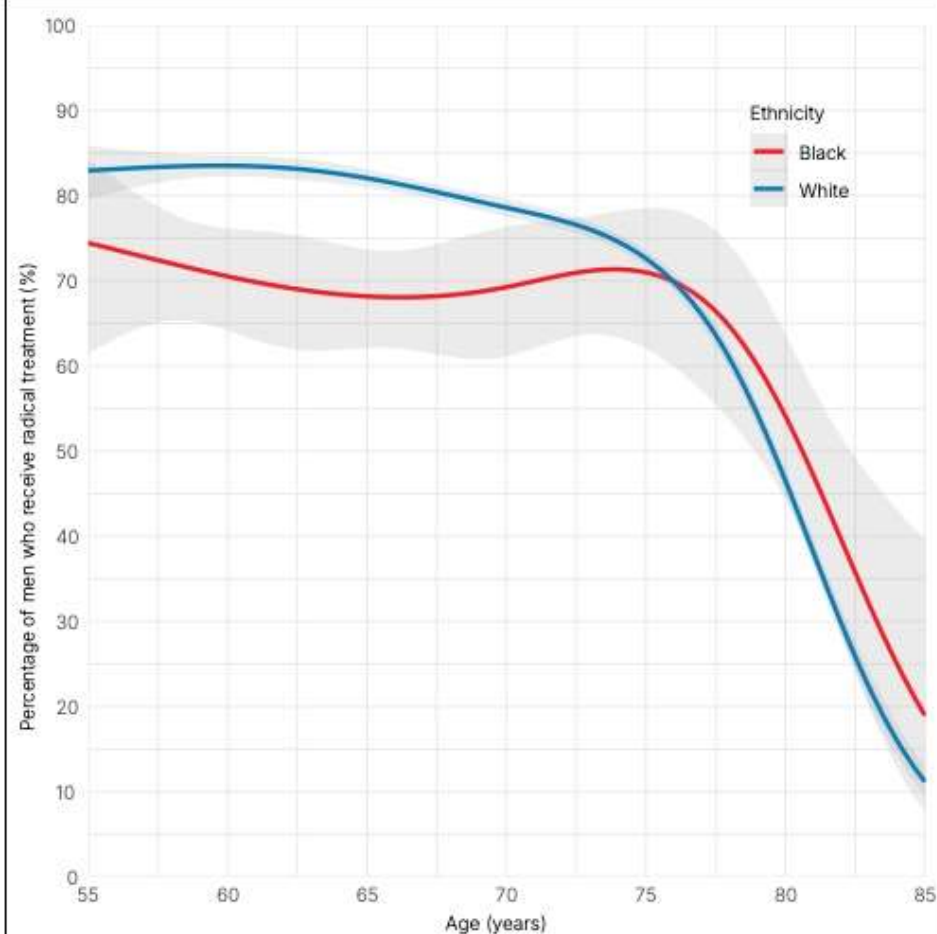


of men experienced at least one
genitourinary complication
requiring a procedural/surgical
intervention within two years
after **radical prostatectomy** in
England (E) and Wales (W)



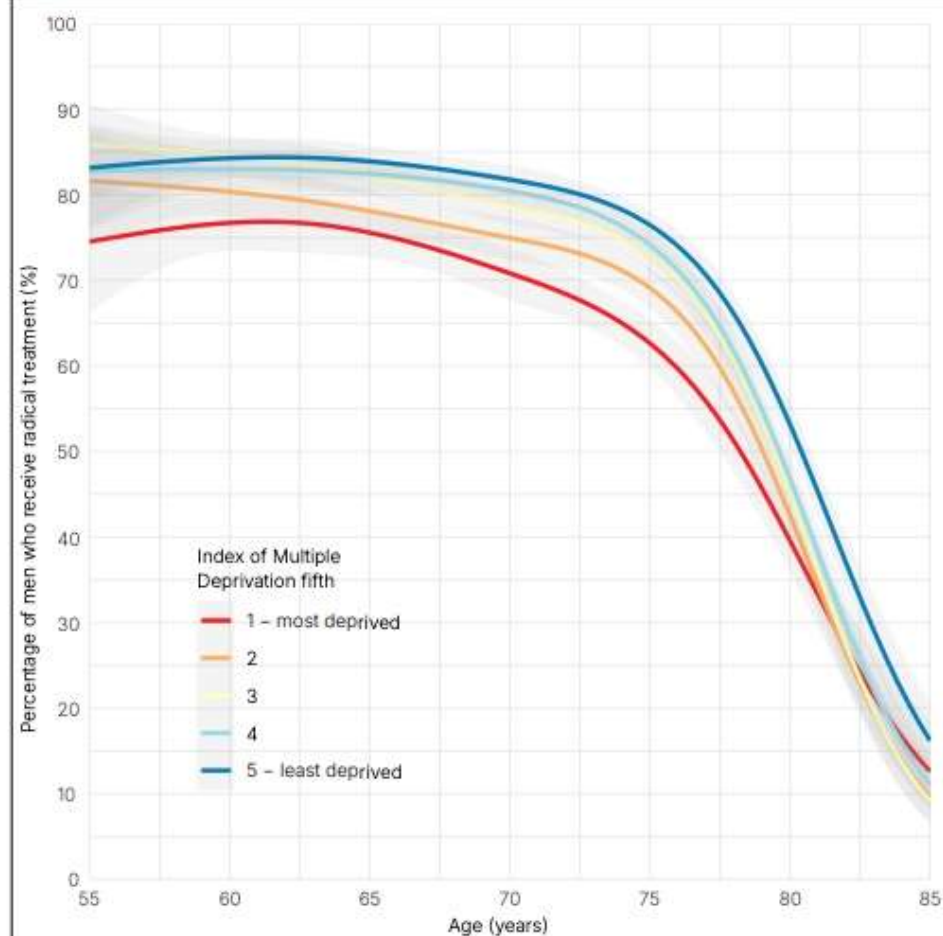
of men experienced at least one
gastrointestinal complication
requiring a procedural/surgical
intervention within two years after
radical radiotherapy in England
(E) and Wales (W)

Figure 8. Percentage of white and black men with high-risk/locally advanced cancer who received radical treatment, by age (in England, 1st January 2020 to 31st December 2021¹⁶).



Grey areas represent 95% confidence intervals.

Figure 9. Percentage of men with high-risk/locally advanced cancer who received radical treatment, by Index of Multiple Deprivation fifth by age (in England, 1st January 2020 to 31st December 2021¹⁶).



Grey areas represent 95% confidence intervals.

Inequalities in prostate cancer treatment



Black men aged 55 to 70 years were less likely to receive radical treatment than white men.

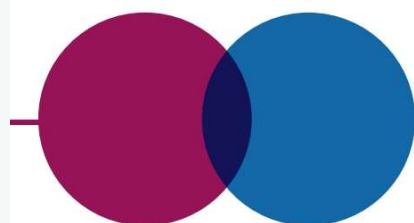
Men living in more deprived areas had lower treatment rates than those in less deprived areas.

Geographic inequality within the UK exists too.

In Yorkshire and the North East, 20.5% of patients had metastases at the time of presentation, compared with 12.5% of those in London.

Health Inequalities Improvement Policy Drivers:

- The NHS Constitution
- 2022 Health and Care Act
- The NHS Long Term Plan
- NHS England Priorities & Planning Guidance
- Government Mandate to the NHS
- Levelling up White Paper
- Digital Health and Care Plan
- Covid19 Elective Recovery Plan
- High Intensity User Programme
- Ten Year Plan



The rollout of the
COVID-19 vaccination
programme in England

Department of Health & Social Care and
Department for Business, Energy & Industrial Strategy

REPORT
by the Comptroller
and Auditor General

SESSION 2021-22
25 FEBRUARY 2022
HC 1106

Key facts

£5.6bn

total spending on the
COVID-19 vaccine
programme by the end of
October 2021 (including
procurement costs for the
UK and deployment costs
for England)

87m

number of COVID-19
vaccine doses
administered in England by
the end of October 2021

85%

proportion of people aged
18 and over in England who
had received two doses
of COVID-19 vaccine by
the end of October 2021,
compared with a planning
assumption of 75%

**More than
340 million**

number of doses of COVID-19 vaccine the UK had contracted
or agreed to purchase by the end of October 2021, for delivery
by the end of 2022

71%

percentage of COVID-19 vaccinations administered by GPs
and community pharmacies up to the end of October 2021,
against an initial planning assumption of 56%

£2.9 billion

total spent to purchase COVID-19 vaccines for the UK up to
the end of October 2021, out of a total spend of £3.3 billion by
the Vaccine Taskforce

£2.2 billion

total spent on COVID-19 vaccine distribution and deployment
in England to the end of October 2021

4.0%

estimated percentage of COVID-19 vaccine doses damaged or
not used in England ('wastage') up to the end of October 2021,
against a planning assumption of 15%–20%

48%–86%

range in percentage of adults vaccinated with two doses by
ethnic group at the end of October 2021 (48% for people of
Chinese origin up to 86% for people of White British origin)

£8.3 billion

total funding available for the COVID-19 vaccination
programme up to the end of March 2022, consisting of
£4.6 billion for the Taskforce, primarily to purchase vaccines,
and £3.7 billion for vaccine deployment

CORE20PLUS CONNECTORS

Connectors are those with influence in their community who can help engage local people with health services.

CORE20PLUS INNOVATION

Projects to improve access to innovative health technologies and medicines are being run with local communities. This work aims to identify, address and minimise healthcare inequalities for Core20PLUS groups through schemes such as the Innovation for Healthcare Inequalities Programme (InHIP).



CORE20PLUS COLLABORATIVE

The collaborative brings together strategic partners and experts working to reduce and prevent healthcare inequalities. Members are drawn from NHS England's key stakeholders, the wider NHS and strategic system partners including arms length bodies, think tanks, charities and academic partners.

CORE20 PLUS 5

NHS England architecture to support delivery of Core20PLUS5;
NHS England's approach to reducing healthcare inequalities



CORE20PLUS ACCELERATORS

Accelerator sites help to develop and share good healthcare inequalities improvement practice across integrated care systems (ICs).

Lancashire and South Cumbria ICS

Humber and North Yorkshire ICS

Nottingham and Nottinghamshire ICS

North Central London ICS

Mid and South Essex ICS

Surrey Heartlands ICS

Corwall and Isles of Scilly ICS

CORE20PLUS AMBASSADORS

The ambassadors are people working within the NHS who are committed to narrowing healthcare inequalities and ensuring equitable access, excellent experience, and optimal outcomes for all – particularly Core20PLUS populations who are more likely to experience healthcare inequalities.



Encouraging black men to prioritise prostate cancer checks

12th February 2025

Prostate cancer disproportionately affects black men, who are twice as likely to be diagnosed with the disease compared to other groups. Early detection saves lives, but cultural barriers and a lack of open conversations can delay vital health checks. The short film, *Embarrassed*, featuring an incredible line-up of black male actors, delivers a powerful message to get checked and start the conversation. By breaking the taboo, we can encourage more men to prioritise their health.



CORE20PLUS5 CONNECTORS

A FAMILY EVENT FREE TO ATTEND & REFRESHMENTS PROVIDED

Cancer Awareness in Gujarati and English

Saturday 2nd September 2023
11 am to 3pm, Belgrave N Centre.

SPEAKERS



Usha Marwaha
Community Connector



Rasha Alhaj
PHD Breast Cancer
Clinical Trials



Miss Jyoti Shah MBE
Consultant Urological Surgeon



Kirit Mistry FRSA
Saha UK Health
Inequalities Lead



Saroj Patel
Community Connector

Join us to connect with cancer experts, survivors who've shared their personal journeys, and informational health booths.

Live Bollywood music from Sur Sangeet from India

For more information website www.sahauk.org or email us for assistance.

Email: connectors@sahauk.org

WhatsApp: Contact Kirit at 07940516666.

As the event is free, we encourage everyone to come on time to enjoy the festivities to the fullest.

We look forward to seeing you on this
South Asian Health Awareness Event, not to be missed.



SOUTH ASIAN
HEALTH ACTION
For better health choices



UNIVERSITY HOSPITALS
OF LEICESTER
NHS TRUST



MACMILLAN
CANCER SUPPORT

<https://onlinelibrary.wiley.com/doi/10.1002/tre.901>

<https://fightingprostatecancer.co.uk/2023/09/cancer-awareness-belgrave-neighbourhood-centre-leicester/>



5 Key Recommendations

National Prostate Cancer Audit State of the Nation Report

1. Aim to achieve high completeness of key **data** items at the point of collection
2. Continue to advocate **active surveillance** for men with low-risk prostate cancer
3. Investigate why men with high-risk/locally advanced disease are not considered for **radical treatment** and aim to reduce that population
4. Review variation between providers in rates of genitourinary/gastrointestinal **complications** and 90-day readmission rates
5. Decisions regarding treatment should consider life expectancy and co-morbidity, balancing the treatment benefits and risks, to ensure **equitable care**