



Minute of Decision

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A Bowel Cancer Screening Programme for New Zealand

Portfolio: Health

On 12 April 2010, following reference from the Cabinet Social Policy Committee, Cabinet:

Background

1 **noted** that on 24 March 2010, SOC:

1.1 deferred consideration of the paper under SOC (10) 26;

1.2 invited the Minister of Health to resubmit the paper to SOC in due course with further information and advice on:

1.2.1 the anticipated benefits of the programme;

1.2.2 the benchmarks against which the pilot programme will be evaluated;

1.2.3 options for discontinuing the programme if the agreed benchmarks are not reached;

1.2.4 comparisons with similar screening programmes that have been undertaken domestically and internationally;

[SOC Min (10) 5/1]

2 **noted** that bowel cancer is the most frequently diagnosed cancer and the second highest cause of cancer death in New Zealand, with approximately 2,750 new cases per annum and in 2007, 1,252 deaths;

3 **noted** that modelling suggests that the newer generation immunochemical faecal occult blood test to be used in New Zealand could provide a lifetime reduction in the incidence of mortality from bowel cancer of 36 per cent;

4 **noted** that 19 of the 27 European Union member states already operate either national programmes or pilots for screening bowel cancer, and that other countries with population programmes include Australia, Israel, the Canadian provinces of Alberta and Ontario, South Korea and Japan;

- 5 **noted** that there is strong support from Cancer Control New Zealand and the sector for the implementation of a national bowel cancer screening programme alongside improvement in existing bowel cancer services;
- 6 **noted** that a successful and equitable screening programme will increase demand for colonoscopy for diagnostic and ongoing surveillance requirements, pathology, and in the short to medium term, surgery and other cancer treatment services, and that the Ministry of Health is working with the health sector to develop and increase workforce and service capacity prior to the commencement of screening;
- 7 **noted** that the previous government committed to fast tracking the implementation of a national bowel cancer screening programme but it failed to appropriate any funding and failed to address the workforce and infrastructure issues necessary to support both existing services and a screening programme;

Bowel cancer screening feasibility study

- 8 **agreed** to support the implementation of a feasibility study for bowel cancer screening to enable the Ministry of Health to gather information on the impact of screening on health services, the costs and benefits to allow Ministers to decide whether or not to roll out a national programme and, if so, the appropriate timing of a wider rollout;
- 9 **noted** that:
- 9.1 the final decision on which District Health Board or District Health Boards will be the site or sites of the feasibility study will be made following an Expression of Interest process;
- 9.2 note that the Expression of Interest process will enable the Ministry of Health to assess willingness, capacity and readiness, and allow a coordinated approach to planning and implementation;
- 10 **noted** that the full cost of the feasibility study will be at a maximum of \$31.6 million across a five year period;
- 11 **noted** that the feasibility study will generate additional demand for bowel cancer services and that these pressures will be absorbed within the baselines of the pilot sites selected;
- 12 **noted** that the Minister of Health has directed that the estimated costs for the information systems be carefully scrutinised, and that all options be considered;
- 13 **noted** that the costs of developing and implementing the feasibility study for bowel cancer screening, including the associated Information Technology development costs, will be part of Health's package in Budget 2010;
- 14 **noted** that the Ministry of Health will report to SOC in February 2011 regarding the progress of the feasibility study's implementation;

Evaluation of feasibility study

- 15 **noted** that the Minister of Health's intention at this stage is to complete the four year feasibility study and the consequent cost analyses before making a decision on whether to launch a national screening programme;

- 16 **noted** that key considerations in assessing whether to roll out the programme nationally would include: uptake; projected mortality benefit; a shift in the stage at which cancers are identified; and a positive cost benefit analysis;
- 17 **noted** that at this time, the total estimated annual cost of a fully implemented National Bowel Cancer Screening Programme (excluding capital costs) is expected to be between \$24 million (restricted age range 60-69 years) and \$53 million (full age range 50-74 years), and that an information system to support the national programme is currently estimated to be between \$6.5 and \$14.4 million with additional operating costs of between \$3.6 and \$7.9 million per year in outyears;

Public announcement

- 18 **invited** the Minister of Health to issue a media statement as part of a pre-Budget announcement, confirming the government's commitment to implementing a Bowel Cancer Screening feasibility study, commencing by October 2011.

Secretary of the Cabinet
