

# Bridging the gap: Enablers and barriers in implementing global cancer care efficiency metrics

## A qualitative implementation study

### AUTHORS

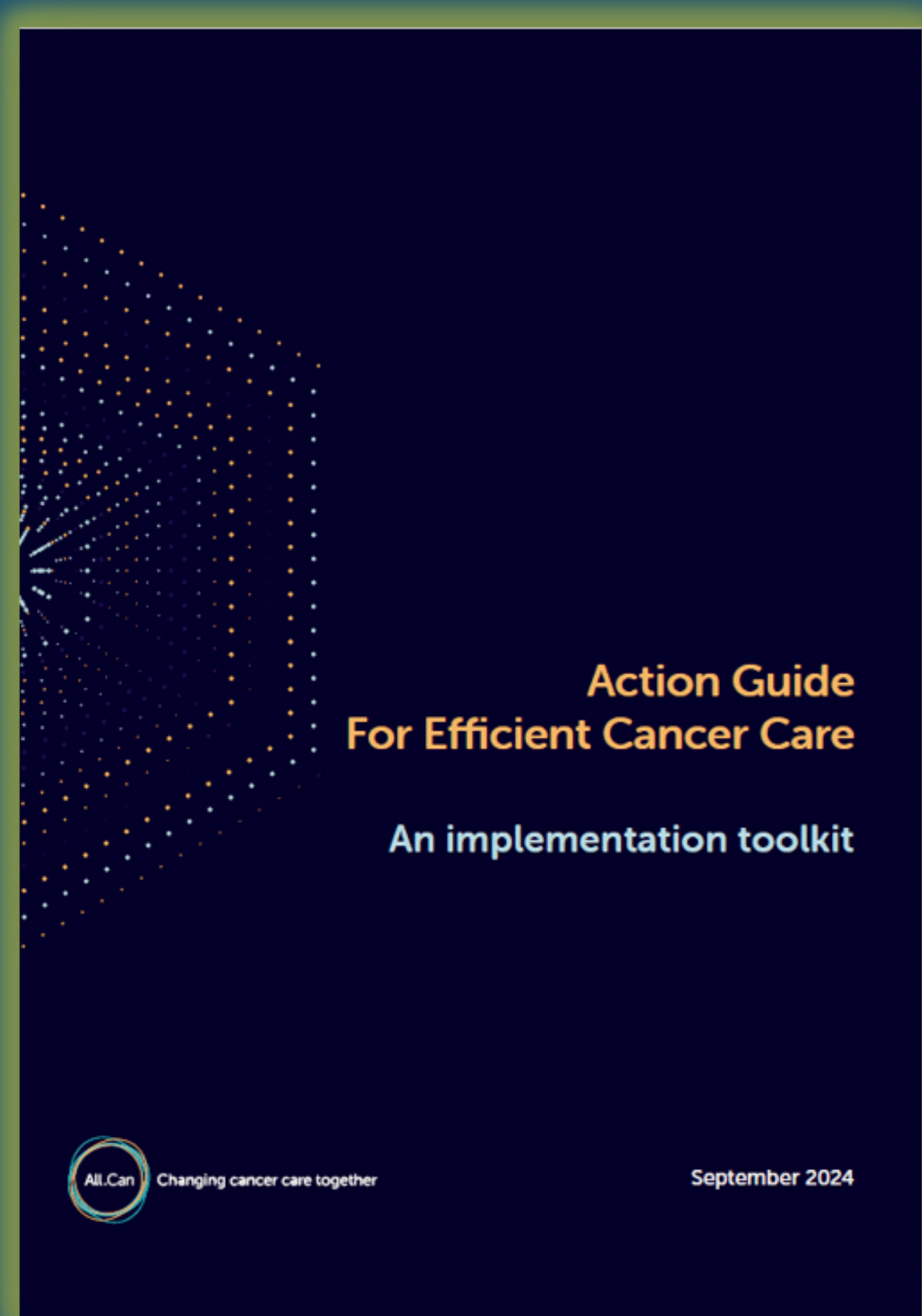
Ana Sofia V Carvalho \* (1,2), Óscar Brito-Fernandes (1,2), Damir Ivanković (1), Erica Barbazza (1), Mădălina Iamandei (3), Eduardo Pisani (3), Niek Klazinga (1,2), Dionne Kringos (1,2)

(1) Amsterdam UMC Location University of Amsterdam, Public and Occupational Health, Meibergdreef 9, Amsterdam, the Netherlands  
 (2) Amsterdam Public Health research institute, Quality of Care, Amsterdam, the Netherlands.  
 (3) All.Can - All.Can International asbl, Brussels, Rue du Luxemburg 22-24, BE-1000 Brussels, Belgium.

\*Get in touch! a.s.carvalho@amsterdamumc.nl



SCAN ME TO KNOW MORE



This research study was conducted as part of the development process of the All.Can Action Guide for Efficient Cancer Care, launched in September 2024.

Identifying and addressing barriers like poor regulation and data gaps is essential to improving the implementation of cancer care efficiency metrics.

Leveraging enablers such as strategic planning and political will can enhance the utilisation of cancer care metrics, driving better outcomes and sustainable care worldwide.

### OBJECTIVE

All.Can International previously identified eight key cancer efficiency metrics as a foundational starting point for standardising measurement across global cancer care pathways. This study aimed to identify enablers, barriers and provide recommendations to implementing these metrics at both national and organisational levels worldwide.

### METHODOLOGY

#### 3 THEMES OF CANCER METRICS ALONG THE CARE PATHWAY



- 21 Semi-structured interviews
- Experts from 18 countries across five continents
- 5 Semi-structured interviews to characterise good practices



Barriers and enablers were identified through:

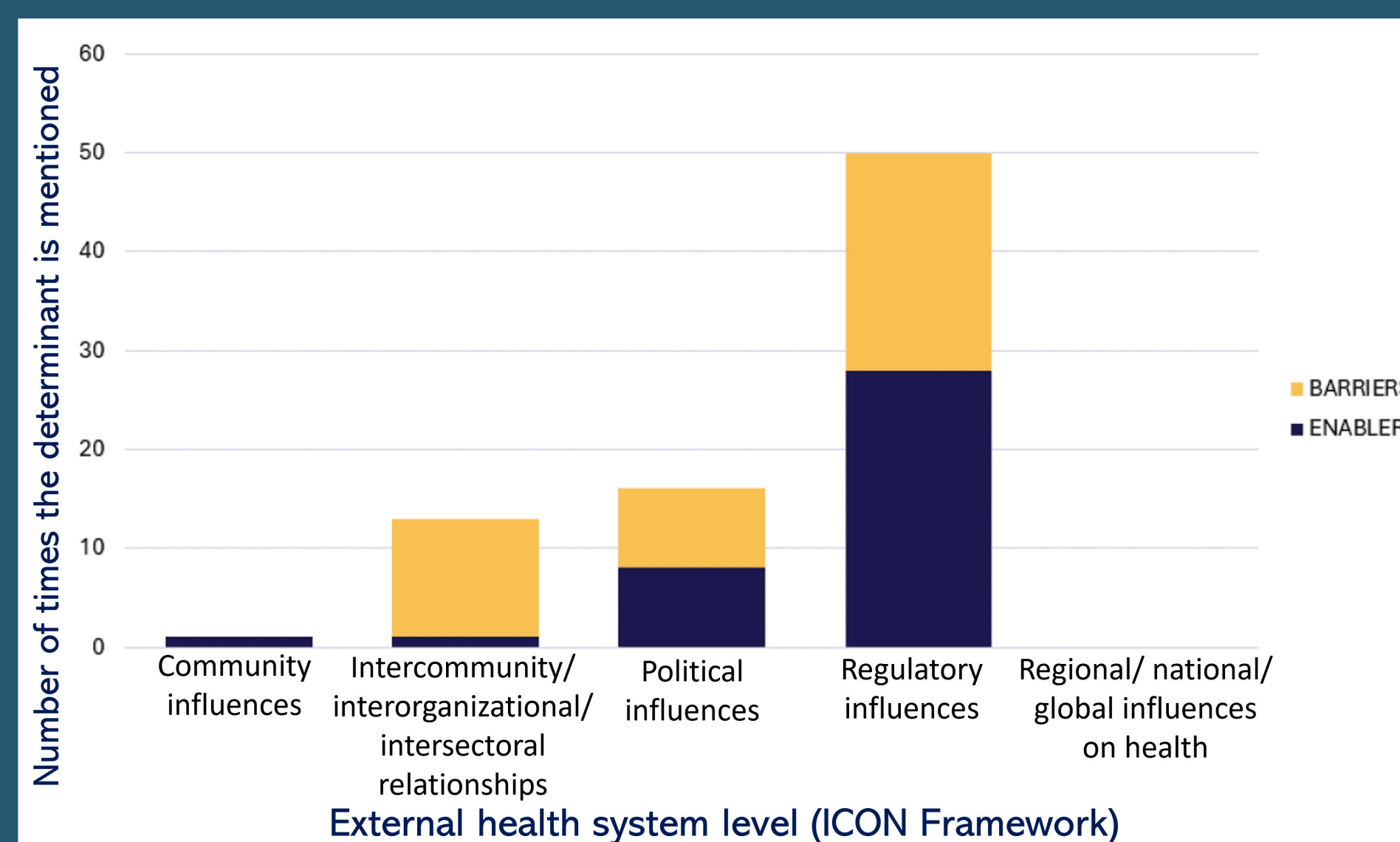
- > Deductive coding with 'attributes of context' from the Implementation in Context (ICON) Framework
- > Inductive coding within each ICON framework attribute

### IMPLEMENTATION RESULTS | BARRIERS AND ENABLERS



Timeliness of care

Regulatory influences were the most prominent (n=50 barriers and enablers).

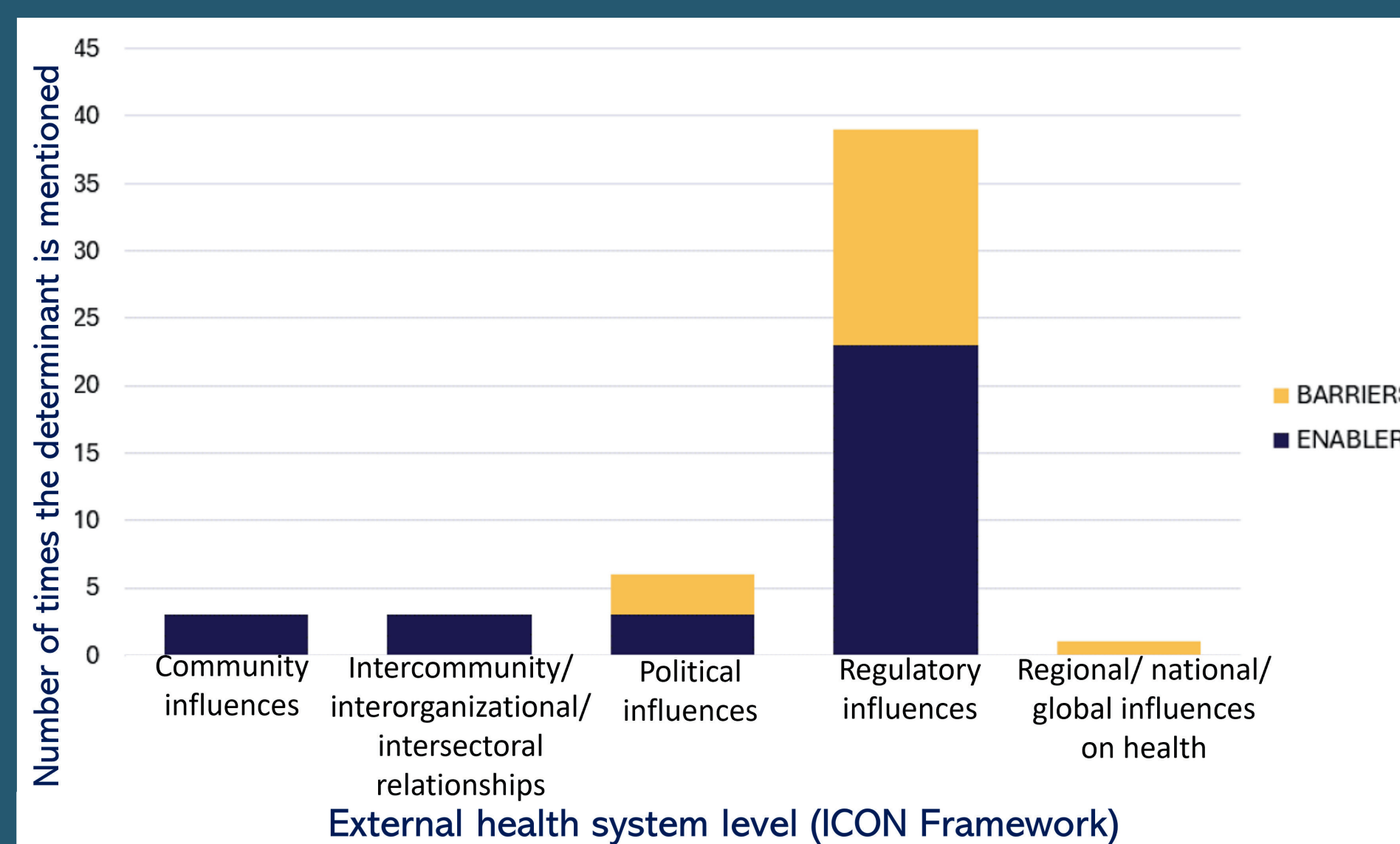


- **Key enablers:** regulation of standardised care pathways (n=6) and national strategic planning documents (n=5).
- **Critical barrier:** poor interoperability of data infrastructures (n=10).



Coordination of care

Regulatory influences were the most prominent (n=39 barriers and enablers).

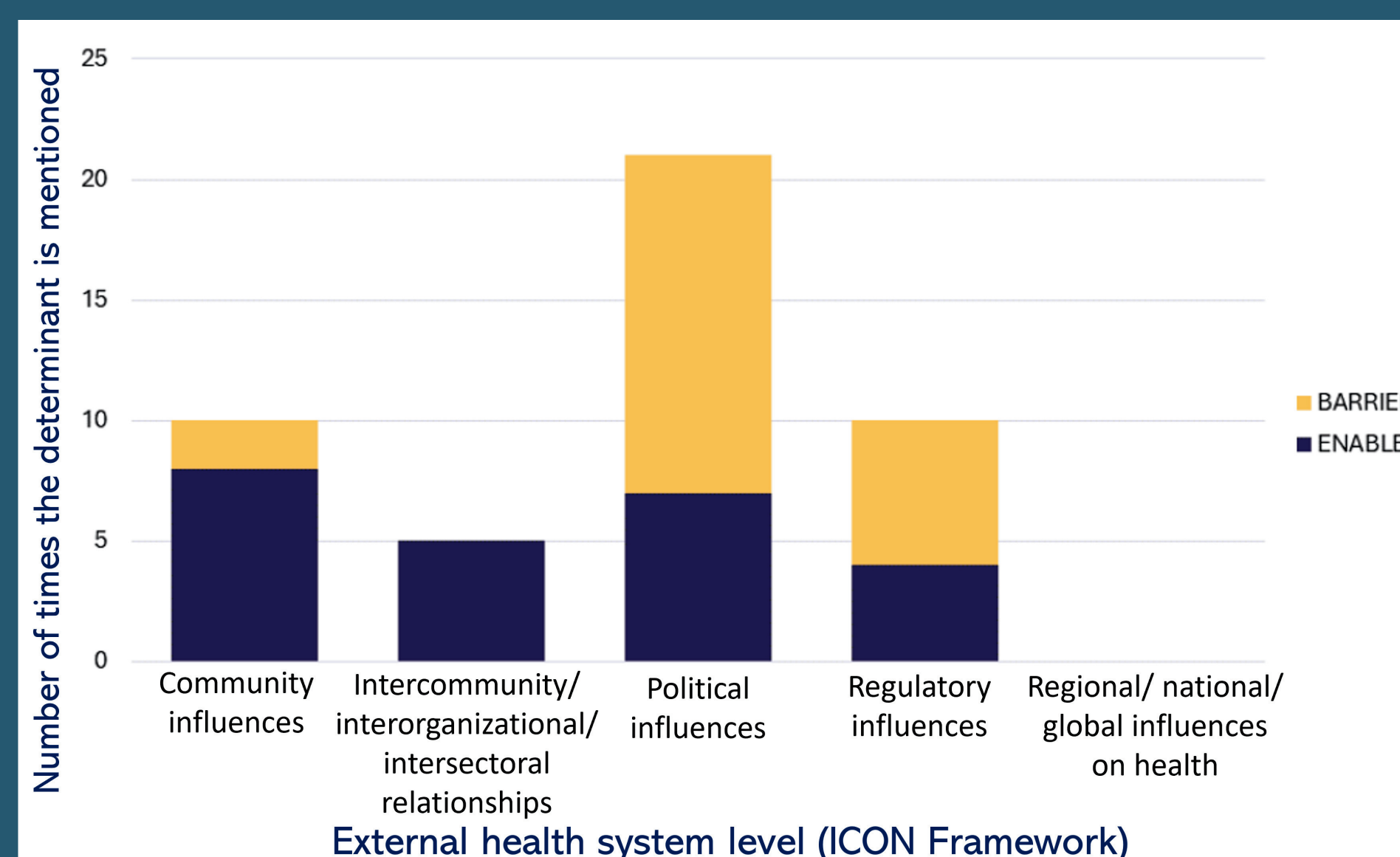


- **Key enablers:** regulations defining the roles of multidisciplinary teams (n=8) and oncology nurses (n=4).
- **Critical barrier:** lack of regulation and prioritisation of oncology nurses' roles (n=8).



Patient-centeredness

Political factors were the most prominent (n=21 barriers and enablers).



- **Key enablers:** political will (n=7) and patient advocacy (n=5).
- **Critical barrier:** absence of a national approach to systematic data collection (n=10).