# **National Cancer Agency**



### Why is this important?

Cancer is New Zealand's biggest killer, we have some of the world's worst statistics when it comes to treatment and prevention. There is a growing 'postcode lottery' for cancer care where your location and proximity to major hospitals and specialists determines a successful diagnosis, treatment and cure.

#### What will we do?

#### In our first 100 days in office, National will:

- Legislate to create an independent National Cancer Agency to drive better access to diagnosis, treatment and care across New Zealand. This will be separate to the Ministry of Health and District Health Boards
- Start the process to appoint specialists and proven leaders in the field to run the Agency and provide expert advice to improve outcomes for cancer patients

### What will the National Cancer Agency do?

The National Cancer Agency will have primary responsibility for better access to diagnosis, treatment and care across New Zealand. They will provide leadership in all aspects of cancer control, including prevention, screening and treatment, guiding scientific research and ensuring variations in outcomes across different groups and regions is reduced. The Agency will report to the Minister of Health.

#### We will ensure:

- Consistency of diagnosis across the country so local GPs have the tools and the knowledge to test and recognise symptoms irrespective of where you are
- Consistency of treatment you shouldn't be disadvantaged by living remotely or in a centre where specialist care isn't available
- Consistency of outcomes you shouldn't have a lower likelihood of surviving if you don't come from the right place. Likewise, you shouldn't receive less post-treatment support if you come from a smaller town

They will be primarily responsible for the Cancer Plan which will direct investment and key performance indicators across DHBs. DHBs will be accountable to the National Cancer Agency for the targets and indicators the Agency sets. It's important that the National Cancer Agency holds DHBs accountable for these targets and has clear structures to ensure delivery.

We expect the Board of the Agency to be made up of a good mix of health experts, clinical professionals and international specialists.

Specific outcomes across different groups, regions and cancers will be set by the National Cancer Agency in consultation with the Minister, but we expect them to focus on faster diagnoses across the country, reducing the incidence of cancer through better primary prevention, and improving treatment irrespective of where you live.

## Where will the money come from?

We expect this to cost \$10m a year.

Funding will be found within baselines from the Ministry of Health.