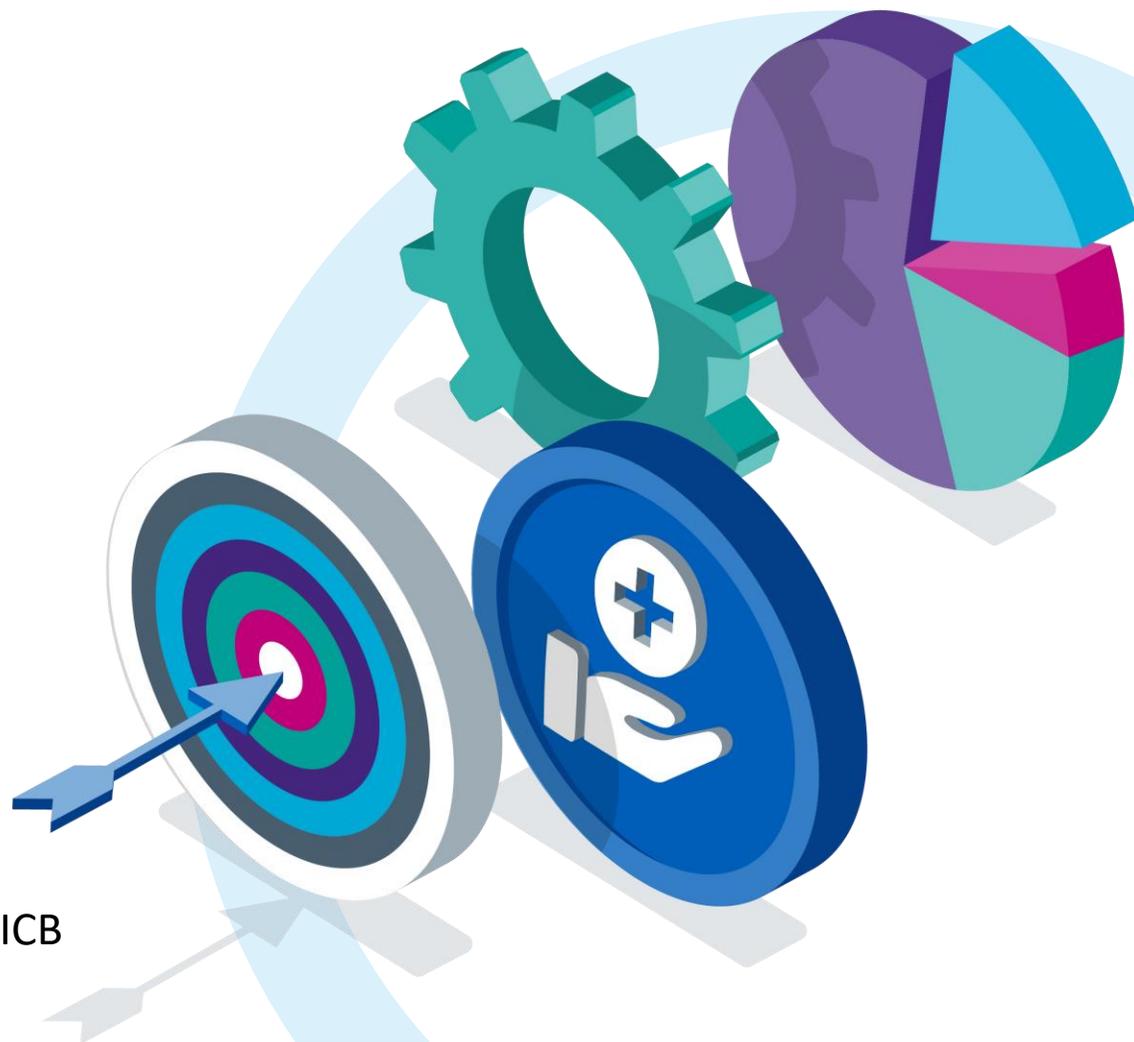


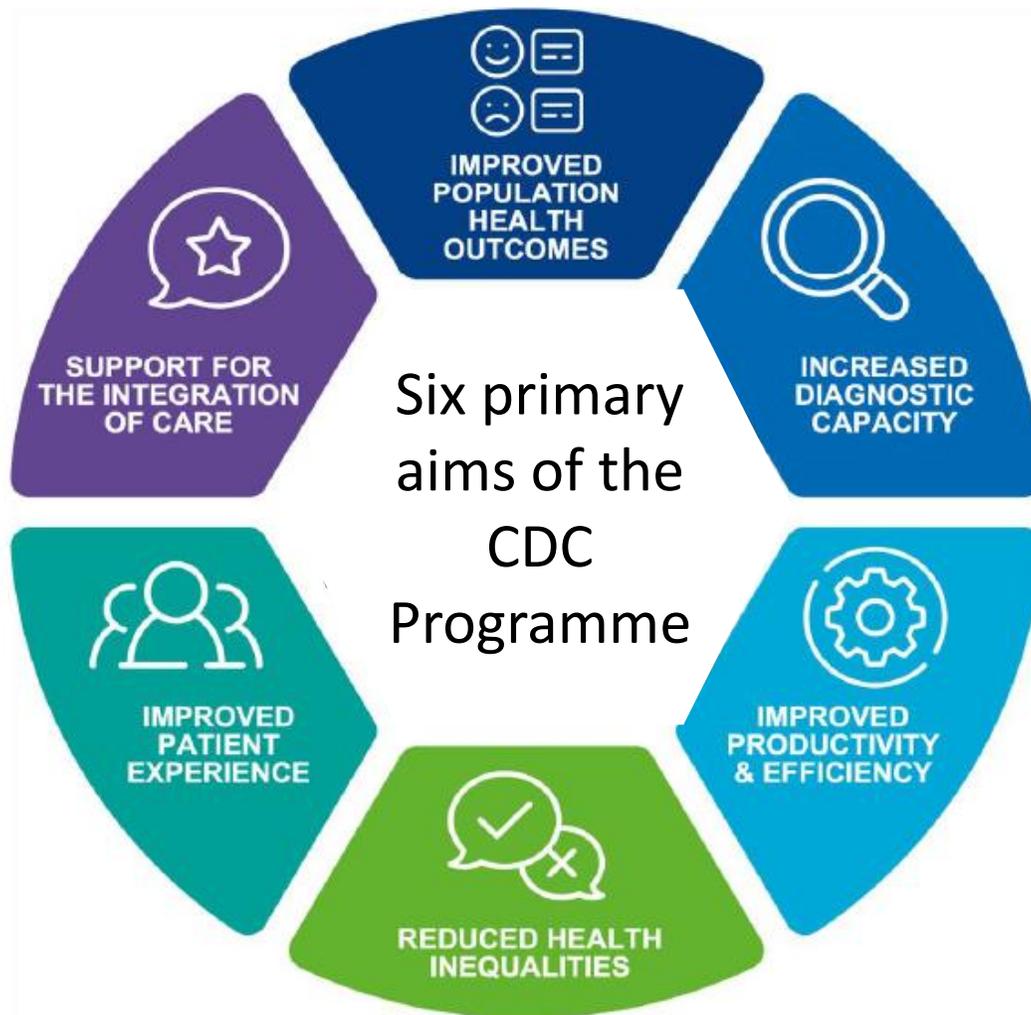
Community Diagnostic Centres

Access to diagnostic services



Nicole da Costa, Transformation Manager, C&W ICB
Steve Snead, System Lead for Diagnostics, C&W ICB
Dr Riya Patel, Researcher, Coventry University
Jackie Kerby, Health Inequalities Programme Manager, C&W ICB

What is a community diagnostic centre (CDC)?



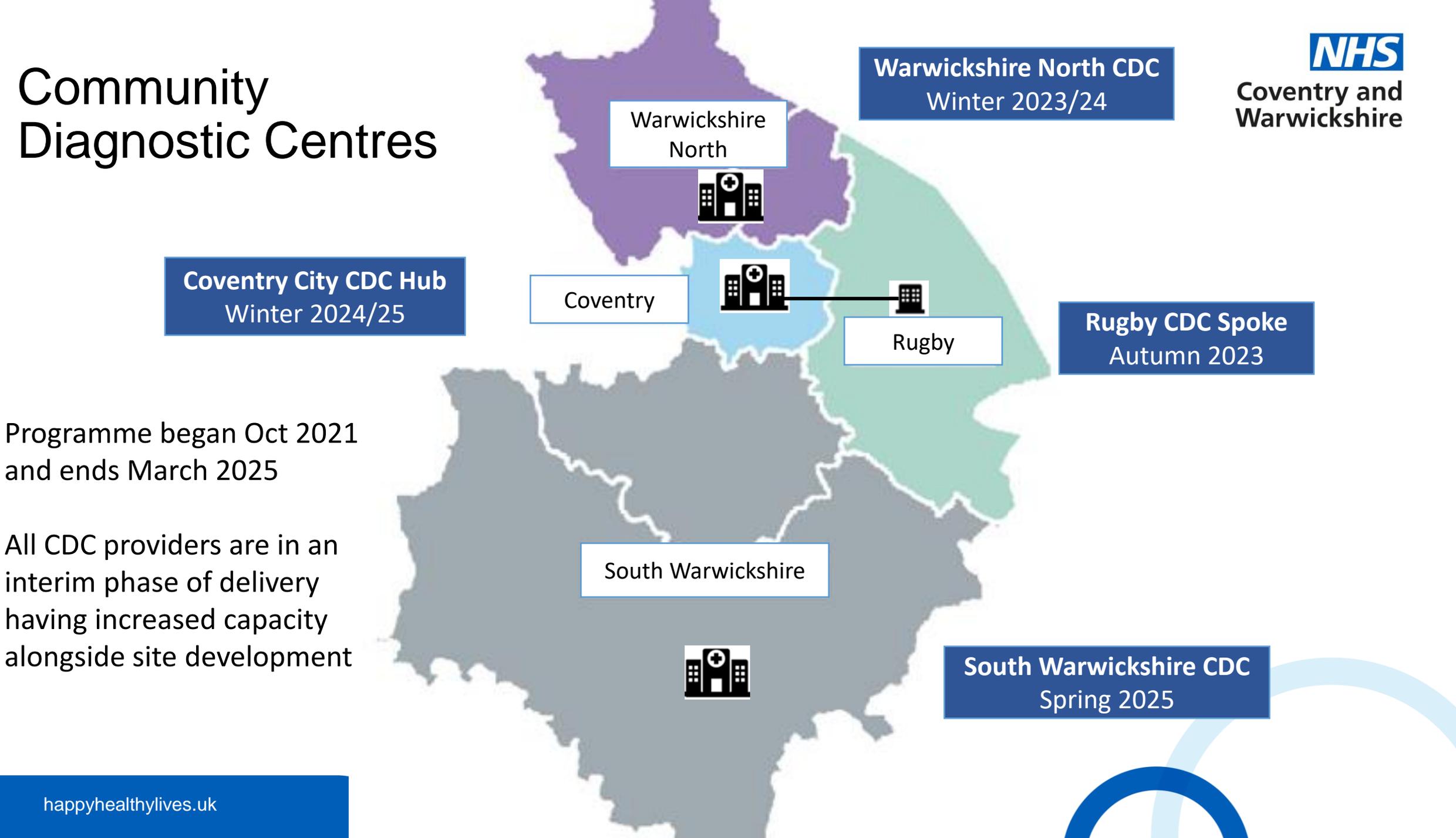
“Community diagnostic centres will deliver additional, digitally connected, diagnostic capacity in England, providing all patients with a co-ordinated set of diagnostic tests in the community, in as few visits as possible, enabling an accurate and fast diagnosis on a range of clinical pathways.”

NHS England and NHS Improvement National CDC Programme Vision Statement

Community Diagnostic Centres



Coventry and
Warwickshire



Warwickshire North CDC
Winter 2023/24

Warwickshire
North



Coventry City CDC Hub
Winter 2024/25

Coventry



Rugby

Rugby CDC Spoke
Autumn 2023



Programme began Oct 2021
and ends March 2025

All CDC providers are in an
interim phase of delivery
having increased capacity
alongside site development

South Warwickshire



South Warwickshire CDC
Spring 2025



How have CDCs made considerations to support the reduction of health inequalities?

CDC programme starts...

Initial focus on increasing diagnostic capacity

Providers worked with local stakeholders to determine CDC locations, within timeframe and financial envelope

Consideration was given to intelligence on the health inequalities faced by local populations within the Trust footprints

Moving forward...

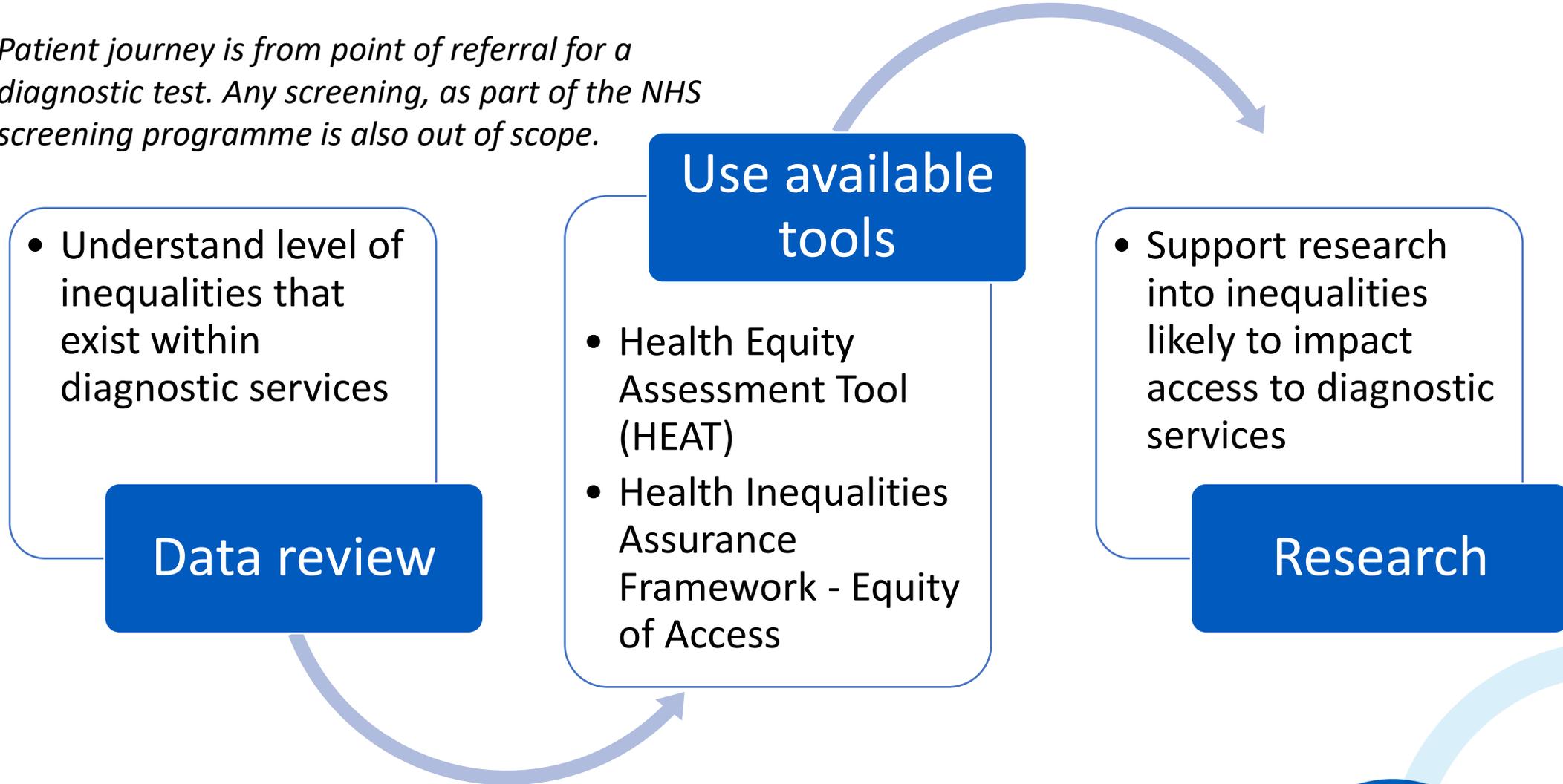
Additional capacity doesn't necessarily improve access for those who experience the greatest health inequalities

Need to increase understanding of inequalities in diagnostics to inform CDC development

Funding was proactively sought and secured for this work

Developing the CDC programme

Patient journey is from point of referral for a diagnostic test. Any screening, as part of the NHS screening programme is also out of scope.



Review of data

Understand the level of inequalities that exist within diagnostic services

Aim: To explore metrics that highlight areas of inequality and identify potential opportunities for service transformation or improvement

- Partners identified urology as an appropriate pathway to explore
- C&W ICB BI team undertook a data quality exercise to explore
 - Which data sets the ICB currently has access to?
 - If these are applied to health inequalities/diagnostics, what are the data gaps
- Next steps:
 - Fill in the data gaps with the support of primary care and providers

Review of data

Understand the level of inequalities that exist within diagnostic services

Cancer diagnoses at local providers in calendar year 2022 by IMD decile

Urological excl p - Select tumour site

Cancers diagnosed

Provider	Category	IMD Decile				
		<--Most deprived		Least deprived --->		
		1	2	3	4	5
GEH	Cancers diagnosed	8	13	10	12	6
SWFT	Cancers diagnosed	1	2	12	27	17
UHCW	Cancers diagnosed	15	19	18	29	27
System	Cancers diagnosed	24	34	40	68	50

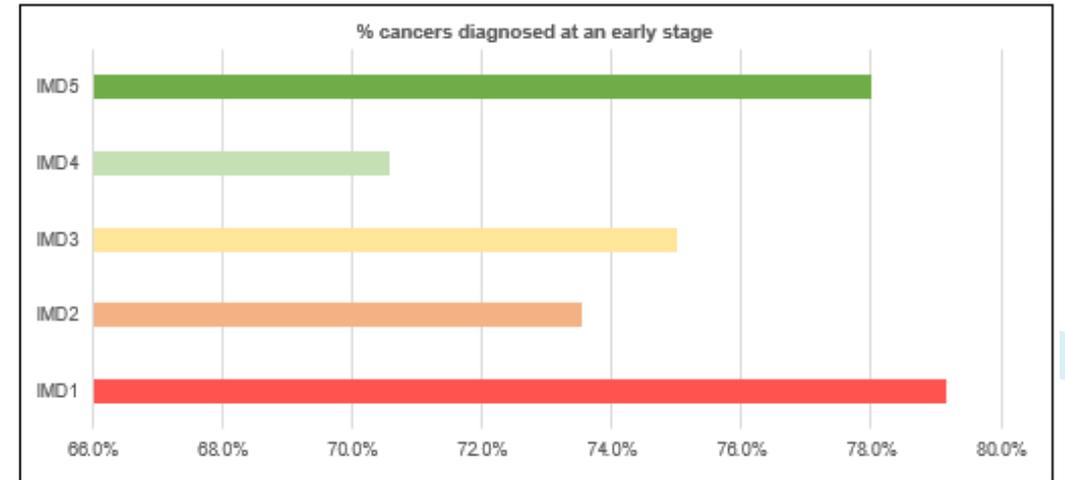
Cancer diagnosis deprivation casemix

Provider	Category	IMD Decile				
		<--Most deprived		Least deprived --->		
		1	2	3	4	5
GEH	% of total cancers diagnosed	16.3%	26.5%	20.4%	24.5%	12.2%
SWFT	% of total cancers diagnosed	1.7%	3.4%	20.3%	45.8%	28.8%
UHCW	% of total cancers diagnosed	13.9%	17.6%	16.7%	26.9%	25.0%
System	% of total cancers diagnosed	11.1%	15.7%	18.5%	31.5%	23.1%

Cancer diagnoses at an early stage

SYSTEM <-- Select organisation or system for graph

Provider	Values	IMD Decile				
		<--Most deprived		Least deprived --->		
		1	2	3	4	5
GEH	Cancers diagnosed at Stage 1-2	7	11	7	9	4
	% diagnosed at an early stage	87.5%	84.6%	70.0%	75.0%	66.7%
SWFT	Cancers diagnosed at Stage 1-2	1	1	10	18	12
	% diagnosed at an early stage	100.0%	50.0%	83.3%	66.7%	70.6%
UHCW	Cancers diagnosed at Stage 1-2	11	13	13	21	23
	% diagnosed at an early stage	73.3%	68.4%	72.2%	72.4%	85.2%
System	Cancers diagnosed at Stage 1-2	19	25	30	48	39
	% diagnosed at an early stage	79.2%	73.5%	75.0%	70.6%	78.0%



Review of data

Understand the level of inequalities that exist within diagnostic services

Cancer diagnoses at local providers in calendar year 2022 by IMD decile

Prostate - Select tumour site

Cancers diagnosed

Provider	Category	IMD Decile				
		<--Most deprived		Least deprived <-->		
		1	2	3	4	5
GEH	Cancers diagnosed	6	23	29	37	18
SWFT	Cancers diagnosed	0	9	40	92	88
UHCW	Cancers diagnosed	43	40	74	65	64
System	Cancers diagnosed	49	72	143	194	170

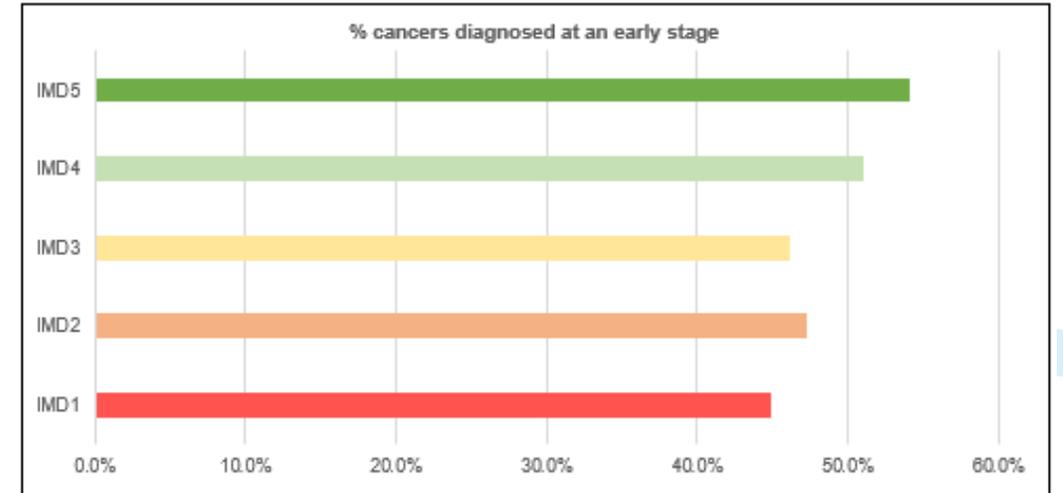
Cancer diagnosis deprivation casemix

Provider	Category	IMD Decile				
		<--Most deprived		Least deprived <-->		
		1	2	3	4	5
GEH	% of total cancers diagnosed	5.3%	20.4%	25.7%	32.7%	15.9%
SWFT	% of total cancers diagnosed	0.0%	3.9%	17.5%	40.2%	38.4%
UHCW	% of total cancers diagnosed	15.0%	14.0%	25.9%	22.7%	22.4%
System	% of total cancers diagnosed	7.8%	11.5%	22.8%	30.9%	27.1%

Cancer diagnoses at an early stage

SYSTEM <-- Select organisation or system for graph

Provider	Values	IMD Decile				
		<--Most deprived		Least deprived <-->		
		1	2	3	4	5
GEH	Cancers diagnosed at Stage 1-2	2	10	11	24	7
	% diagnosed at an early stage	33.3%	43.5%	37.9%	64.9%	38.9%
SWFT	Cancers diagnosed at Stage 1-2	0	2	21	40	52
	% diagnosed at an early stage		22.2%	52.5%	43.5%	59.1%
UHCW	Cancers diagnosed at Stage 1-2	20	22	34	35	33
	% diagnosed at an early stage	46.5%	55.0%	45.9%	53.8%	51.6%
System	Cancers diagnosed at Stage 1-	22	34	66	99	92
	% diagnosed at an early stage	44.9%	47.2%	46.2%	51.0%	54.1%



Use available
tools

Use available tools to identify
opportunities to reduce inequalities

- Heat Equity Assessment Tool (HEAT)
- Health Inequalities Assurance Framework – Equity of Access
 - C&W ICB Health Inequalities Maturity Matrix aims to measure and monitor core5 and major NHS transformation programmes
 - Matrix is in development with ‘Equity of Access’ domain the first domain of eight

Criteria	For example
Physical location	<ul style="list-style-type: none"> • Transport links • Number of service locations
Service accessibility and navigation	<ul style="list-style-type: none"> • Finding the right place • Physical accessibility
Service availability	<ul style="list-style-type: none"> • Flexibility of service hours • Longer appointments where needed
Digital engagement	<ul style="list-style-type: none"> • Patient choice • Two-way digital systems
Quality assurance	<ul style="list-style-type: none"> • Continuous improvement • User consultation

A qualitative exploration of inequalities on access to community diagnostics

An action research initiative to look at improving equity of access community diagnostics centres, starting in Warwickshire North with GEH and looking to include Coventry and Rugby



Aims:

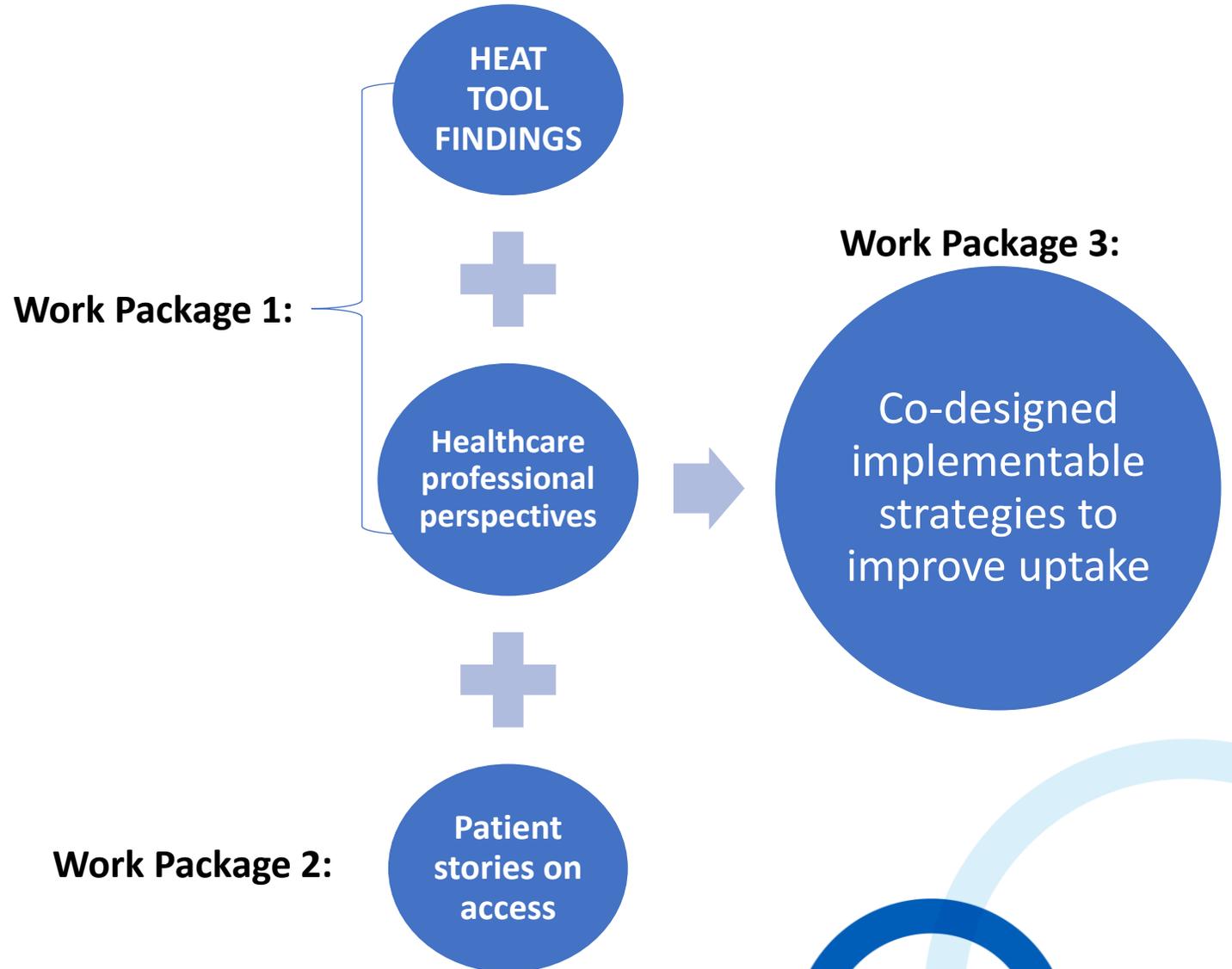
- To increase our understanding of the barriers faced by local population groups in accessing diagnostic services
- To explore how these can be overcome such that these populations feel better supported to access necessary diagnostic tests in a timely manner.

C&W ICB have commissioned Coventry University to conduct a qualitative project in partnership with Healthwatch Coventry, Healthwatch Warwickshire and EQuIP

Research overview

Research Plan:

- Work package 1: Data exploration stage
- Work package 2: Data gathering and prioritisation
- Work package 3: Implementation and scalability.



Systemwide change

- Increased understanding of inequalities in diagnostics and opportunities for improvement will be shared across the system to support and influence change
- The CDC programme also seeks to learn from others working to reduce health inequalities

Questions?

