

# Aide Memoire

## Meeting between the Hon Dr Shane Reti, Minister of Health and Mr Rami Rahal, Chief Executive of Te Aho o Te Kahu, Cancer Control Agency

<b>Date due to MO:</b>	29 May 2024	<b>Date of Visit:</b>	5 June 2024
<b>Security level:</b>	IN CONFIDENCE	<b>Health Report number:</b>	H2024041865
<b>To:</b>	Hon Dr Shane Reti, Minister of Health		

### Contact for telephone discussion

Name	Position	Telephone
Mr Rami Rahal	Chief Executive	s 9(2)(a)
Ms Nicola Hill	General Manager	s 9(2)(a)

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### About the visit

<b>Purpose</b>	The purpose of this meeting is to provide you with advice on topical cancer related activities across Aotearoa, New Zealand.
<b>Visit details</b>	<b>Date:</b> 5 June 2024 <b>Time:</b> 10.15am to 10.45am <b>Venue:</b> Minister's Office 6.6, Parliament Buildings
<b>Attendees</b>	Mr Rami Rahal, Chief Executive, Te Aho o Te Kahu Ms Nicola Hill, Deputy Chief Executive, Te Aho o Te Kahu Dr John Fountain, Manager, Data & Analytics, Te Aho o Te Kahu

## Background and context

1. Te Aho o Te Kahu, the Cancer Control Agency (the Agency) reports to you as Minister of Health and meets with you monthly.
2. You last met with Mr Rahal for an Agency-specific meeting on 7 May 2024 to discuss the Agency, its deliverables, and topical cancer related activities (refer to **H2024039917**). Refer to **Appendix 1** for this meeting's agenda.

## Topics for discussion

### Ovarian Cancer Registry

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### Blood Cancer Medicines Availability Analysis

7. In 2022, The Agency published the Cancer Medicines Availability Analysis report which listed the 20 medicines that were funded for the treatment of cancer in Australia but not in New Zealand, and also met a minimum threshold of clinical benefit based on a tool developed by the European Society for Medical Oncology (ESMO). At the time, there was no tool to measure the magnitude of clinical benefit for blood cancer medicines, so the report was only able to describe the clinical benefit for solid tumour medicine gaps.

8. The Agency is currently expanding the Cancer Medicines Availability Analysis to include blood cancer medicines, now that the tool to assess magnitude of clinical benefit for those medicines has become available. The analysis will describe those blood cancer medicines of significant clinical benefit (according to the ESMO Magnitude of Clinical Benefit: Haematology tool) that are currently funded in Australia, but not in New Zealand. The analysis compares medicines available through 1 January 2024.
9. Good progress is being made, final checking and moderation of the data is well underway, and the draft report is in development. The current provisional analysis suggests there are 57 medicine-indication pairs funded in Australia but not in New Zealand. Because some medicines are used together (as a regimen) for a particular indication, the number of gaps reduces to about 50 regimen-indication pairs. Of the 50 regimen-indication pairs identified, the analysis thus far suggests approximately 20% (or around 10) will be determined to have a high magnitude of clinical benefit. The majority of those are used in a non-curative setting. We will advise the Ministers office of the final results by the end of June.
10. Of note, the number of gaps in blood cancer medicine availability, between Australia and New Zealand, appears to have increased significantly since 2022. At that time, The Agency identified 26 regimen-indication gaps.
11. The Agency staff are aware that some of the medicine gaps the Blood Cancer Medicines Availability Analysis will highlight as having a high magnitude of clinical benefit have been funded by Pharmac since 1 January 2024. Others are currently being considered for funding and may be funded prior to the reports' release. We will provide advice about relevant recent funding decisions at the time the draft report is sent to your office.
12. The final draft report will be provided to your office by the end of June, with the intention to release publicly soon after. The publication of the report will generate significant interest and there is likely to be media and public expectation that an announcement about funding for additional cancer medicines will follow shortly after the release of the report. We will communicate with your office about a plan for the release of the report.

### **Prostate Cancer - Early Detection**

13. Since meeting with you in May, the Agency has been working with Health New Zealand to develop a briefing proposing a quality improvement and harm reduction programme for the early detection of prostate cancer. The briefing will provide detail on a recommended approach to this work, approximate costs and estimated timeframes.

14. The Agency continues to support the view that there is currently not enough evidence to deliver a prostate screening programme or pilot programme in New Zealand.
15. There is a significant study underway within the European Union called 'Prostate Cancer Awareness and an Initiative for Screening' (PRAISE-U). The study will provide valuable insights into the feasibility and benefits of the introduction of a prostate cancer screening programme in New Zealand. The Agency will engage with PRAISE-U to create opportunities for connection and early insight into their work.

### **Group Manager Programmes Appointment**

16. Hamish More, Group Manager Programmes, joined the Agency on Monday 27 May 2024. This is a new position, strengthening the executive leadership of the agency. Reporting to the Chief Executive, this position is responsible for the majority of the delivery of the Agency's work programme. Hamish has extensive experience in senior leadership and management roles in both the government and private sectors, including the Ministry for the Environment, Fire & Emergency New Zealand, Department of Conservation, Hewlett Packard and PricewaterhouseCoopers.

### **Cancer Action Plan Update**

17. Work has commenced on the refresh of the Cancer Action Plan (the Plan). The first phase of this work is a stocktake of progress on the 2020 Plan. This will be followed by a refresh of the actions in the plan, taking into consideration government priorities, and engaging with health entities and key stakeholders across the system. This refresh aims to confirm the actions required for the remaining five years of the current plan, to further advance aspirations for improving cancer outcomes across New Zealand.
18. This work is planned to be completed for your approval to align with the fifth anniversary of both the plan and the establishment of the Cancer Control Agency, in December 2024.

## Cancer System Activities

19. The Agency has provided you with a summary of Cancer System activities from 1 September 2023 – to 30 May 2024. It is included in this briefing as Appendix 2.



Mr Rami Rahal  
Chief Executive  
**Te Aho o Te Kahu, Cancer Control Agency**

PROACTIVELY RELEASED

## Appendix 1: Agenda

Time	Details	Minister's Office notes
10.15am	Introduction	
10.20am	Ovarian Cancer Registry	
10.25am	Blood Cancer Medicines Availability Analysis	
10.30am	Prostate Cancer - Early Detection	
10.35am	Group Manager Programmes Appointment	
10.40am	Cancer Action Plan Update	

## Appendix 2: Cancer system activities from 1 September 2023 – to 30 May 2024

When	Activity	Who was involved	More information
12 September 2023	<p>New HPV cervical screening programme launched for women and people with a cervix aged 25 to 69, after consultation with their healthcare provider, can choose one of two cervical screening test options:</p> <ul style="list-style-type: none"> <li>• HPV vaginal swab test, either a self-test or assisted by a clinician</li> <li>• A liquid based cytology sample, previously referred to as a smear test, which is tested for HPV.</li> </ul> <p>If HPV is detected cytology will be processed automatically without the person needing to return for another test.</p>	National Screening Unit; Health NZ; Te Aho o Te Kahu	<p>85% of people who develop cervical cancer in Aotearoa New Zealand have never been screened or may have been screened infrequently.</p> <p>Māori and Pacific peoples tend to experience higher rates of cervical cancer so it's important we take steps to address inequities when it comes to cervical screening.</p> <p>The National Cervical Screening Programme uses HPV Primary Screening to continue making progress toward the goal of eliminating cervical cancer.</p>
September 2023	Published the Endometrial hyperplasia and cancer guidelines (non-surgical and fertility preserving management) in time for Gynaecological Cancer Awareness Month.	Te Aho o Te Kahu; New Zealand Gynaecological Cancer Group; Health New Zealand	
October 2023	Second phase of Bay of Islands Hospital redevelopment programmes saw the opening of the Family Health Centre which accommodates primary health, outpatient, oncology and renal services.	Health New Zealand   Te Whatu Ora	



	This will help whānau from Bay of Islands rōhe from south of Kawakawa to Kāeo from travelling to Whangārei or Auckland to receive treatment.		
1 December 2023	Stem Cell Transplant Model of Care finalised following 18 months of extensive stakeholder engagement The Model represents the comprehensive end-to-end pathway for optimal transplant and cellular therapy.	Te Aho o Te Kahu; Health New Zealand	
14 December 2024	\$800,000 Kimiora Cancer Infusion service in Whanganui Hospital opens. Up to 10 patients a day will receive chemo or non-chemo infusion therapies.	Health NZ: Te Aho o Te Kahu	
14 February 2024	Funding two new cancer drugs for metabolic breast cancer and acute myeloid leukaemia from 1 July 2024.  The medicines will have protection from delisting and subsidy reduction until 30 June 2027.	Pharmac	Ribociclib (branded as Kisqali) for unresectable locally advanced or metastatic hormone-receptor positive (HR-positive), human epidermal growth receptor-2 negative (HER2-negative) breast cancer.  Midostaurin (branded as Rydapt) for de novo acute myeloid leukaemia (AML) that is FMS-like tyrosine kinase 3 (FLT3) mutation positive.
15 February 2024	Increased breast screening eligibility for 70 – 74 year olds, to fund screening for 60,000 additional women eligible each year.	National Screening Unit; Health NZ; Te Aho o Te Kahu	
29 February 2024	Estimated \$3M of government funding to provide equitable access to PET-CT scans, supported by an updated National PET-CT indication list and criteria.  This will provide an additional 1,000 publicly funded PET-CT scans a year.	Te Aho o Te Kahu and Health New Zealand	The Agency led the work in updating the updated National PET-CT indication list and criteria, which involved the Radiation Oncology Working Group.

8 March 2024	Introduced a faster cancer treatment health target - 90 per cent of patients to receive cancer management within 31 days of the decision to treat	Ministry of Health; Health New Zealand; Te Whatu Ora	Part of wider Health targets including: <ul style="list-style-type: none"> <li>• Improved immunisation for kids - 95 per cent of children to be fully immunised at 24 months of age.</li> <li>• Shorter stays in emergency departments - 95 per cent of patients to be admitted, discharged or transferred from an ED within six hours.</li> <li>• Shorter wait times for first specialist assessment – 95 per cent of patients to wait less than four months for an FSA.</li> <li>• Shorter wait times for treatment – 95 per cent of patients to wait less than four months for elective treatment.</li> </ul>
8 March 2024	Sod turning for new cancer radiotherapy Centre at Whangārei Hospital, which will include a LINAC for radiation treatment. When the centre opens in 2026 it will save around 520 Northlanders a year from travelling to Auckland for treatment.	Health New Zealand; Te Aho o Te Kahu	
13 March 2024	Launched a new mobile breast screening unit in Counties Manukau to increase accessibility for up to 6,000 women a year and brings the national fleet to 13 mobile units.	Health New Zealand	
15 March 2024	Aotearoa’s first provincial PET-CT scanner opened by Minister of Health in Whangarei.  ARG Te Tai Tokerau Radiology (the new branch of RHCNZ Medical Imaging Group) will reduce the need for people living in Northland to travel to Auckland for scanning. .	Health NZ and RHCNZ Medical Imaging Group	
15 March 2024	Pharmac agree to continue to exempt children with cancer under the 81b exemption	Pharmac	<a href="#">Funding process for child cancer medicines to remain - Pharmac   New Zealand Government</a>

26 March 2024	<p>National Travel Assistance funding boost of \$18m announced. Following increases came into effect from 1 April 2024:</p> <ul style="list-style-type: none"> <li>• Mileage rates rising from 28c to 34c a kilometre and nightly accommodation rates from \$100 to \$140 a night.</li> <li>• Rate for those staying with friends/whānau increase from \$25 to \$35 a night.</li> <li>• More flexible payment options, including pre-payment and the ability to apply online to be piloted and phased in.</li> </ul>	Health New Zealand; Te Aho o Te Kahu; Cancer Society; Hei Āhuru Mowai	
12 April 2024	From 1 May 2024 Pharmac will fund <u>niraparib (branded as Zejula)</u> for the maintenance treatment of advanced, high-grade, platinum sensitive ovarian, fallopian tube or primary peritoneal cancer.	Pharmac	<p>Niraparib funded for all people who meet eligibility criteria, irrespective of BReast CANcer (BRCA) gene mutational status or homologous recombination deficiency (HRD).</p> <p>Approximately 110 people will benefit from niraparib in the first year of funding, increasing to about 160 people per year by year 5.</p>