

**WE ARE  
MACMILLAN.  
CANCER SUPPORT**

**A briefing for  
MPs in England**

**UNLOCKING  
THE CANCER  
DRUGS FUND  
FOR YOUR  
CONSTITUENTS**

Macmillan Cancer Support has created this briefing document to help you answer your constituents' questions about the Cancer Drugs Fund and help them access clinically effective drugs they may have previously struggled to get hold of.

## What is the Cancer Drugs Fund?

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In July 2010, Mike Richards, the National Cancer Director, published a report that revealed it is harder for cancer patients in the UK to access the drugs they need compared to patients in other countries. In particular, this is the case for people with rarer cancers.

In response to this, the Government announced it would create a Cancer Drugs Fund of £200 million a year to help cancer patients access the drugs their doctors recommend for them. On 1 April 2011 the Fund was launched. It will be available until the end of 2013 when a new drugs pricing system will be put in place.

Before, during and after the General Election in 2010, Macmillan campaigned for people with rarer cancers to have fair access to clinically effective drug treatments. Naturally, we are delighted that the Cancer Drugs Fund has been established and we hope the needs of people with rarer cancers will be prioritised when funding decisions are made.

## How was the Fund developed?

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Between October 2010 and January 2011 the Government consulted on how the Cancer Drugs Fund should work.

At the same time, the Government also set up a £50 million interim Cancer Drugs Fund to bridge the gap until the full Fund was up and running.

The findings from the consultation and the learnings made from the interim Fund were taken into consideration as the current system was developed.

## What is available through the Fund?

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Despite efforts by the National Institute for Health and Clinical Excellence (NICE) to make its drug appraisal process more flexible, many cancer drugs are still not available through the NHS.

### The Fund's aim is to give patients access to cancer drugs that:

- NICE has decided not to approve on the ground of cost-effectiveness
- NICE has not approved for a patient's specific type of cancer
- Are currently going through the NICE appraisal process.

The Fund also covers drugs for some pre-cancerous conditions.



## Who controls the spending of the Fund?

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Clinically led panels made up of cancer experts have been set up in England's 10 Strategic Health Authorities (SHA). They decide how the funds allocated to them from the Department of Health (DH) should be spent.

The amount received by each region depends on its population size and demographic make-up.

<b>Region (SHA)</b>	<b>£(total £200m)</b>
East Midlands	16.9m
East of England	20.6m
London	30.5m
North East	11.3m
North West	29.6m
South Central	13.7m
South East Coast	15.6m
South West	19.2m
West Midlands	21.6m
Yorkshire and Humber	21.0m

The proposed changes to NHS commissioning structures are scheduled to come into force in April 2012. Over the next year the DH will discuss with the Shadow NHS Commissioning Board how these changes will affect the way the Cancer Drugs Fund operates.

## How can a constituent access drugs through the Fund?

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If one of your constituents asks you about getting access to a drug through the Cancer Drugs Fund, advise them to speak to their consultant or lead cancer clinician.

Only these health professionals can apply on a patient's behalf for funds for a drug, and they can only do this after they have explored all other potential funding routes without progress.

In particular, the consultant or lead clinician should look into whether it would be appropriate to make an Individual Funding Request to the Primary Care Trust.

## How are funding decisions made?

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The Cancer Drugs Fund panels in the SHAs make their decisions based on the evidence they receive from a patient's consultant or clinician. Panels are advised about the clinical effectiveness of a treatment, a patient's individual clinical circumstance and the cost-effectiveness of the treatment. In some regions, panels may ask clinicians to give oral evidence in support of an application.

When making funding decisions, panels have been asked to take into account that there may be a limited evidence base for medicines that treat rarer cancers.

**If any of your constituents has a question about the Cancer Drugs Fund that you can't answer please advise them to contact the Macmillan Support Line on 0808 808 00 00. We're here to help with anything relating to a cancer diagnosis.**

## Are some drugs available automatically through the Fund?

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To speed up the decision-making process, many panels have put some drugs on a priority list, meaning the Cancer Drugs Fund funds them automatically.

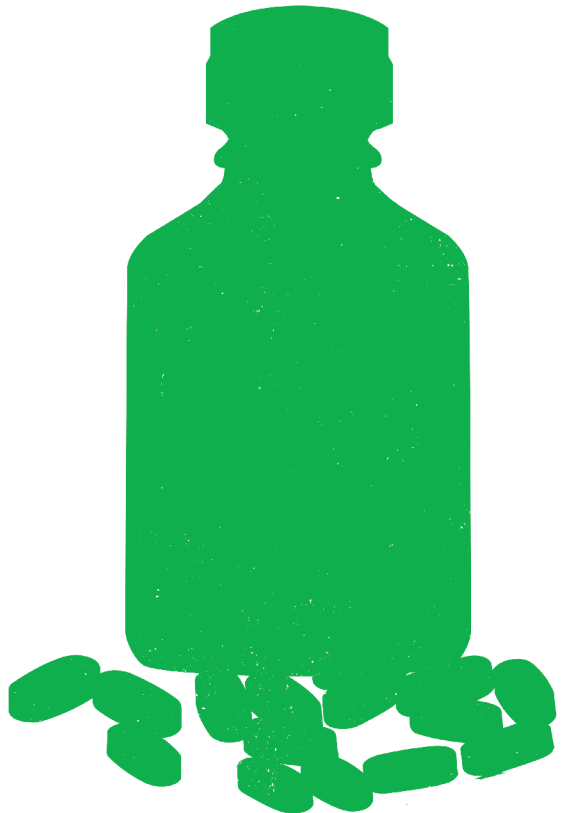
The DH has asked any panels that do this to keep their priority list under review to ensure they are responsive to any new decisions made by NICE and that they most accurately reflect the needs of their local population.

Details of the drugs on your SHA panel's priority list, and its wider Cancer Drugs Fund policy, should be available on your SHA's website.

## How quickly are decisions made?

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The DH has asked panels to be timely in their decision making and use as guidance the NHS's target for the commencement of cancer treatment. This is that a patient begins treatment no more than 31 days after it has been decided that there is a medicine available to treat, slow down or manage the symptoms of their cancer.



## How are patients informed about the Fund?

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Consultants and clinicians are being encouraged to have open and frank conversations with patients about the merits of all drug treatment options and, where appropriate, to talk about palliative and end of life care.

If a consultant or clinician recommends any treatments, they should provide information about the benefits and possible side effects of them to their patient. Where a treatment might only be available through the Cancer Drugs Fund, consultants should inform the panel when making an application that their patient has been provided with this information and has given the necessary consent for an application to go ahead.

## How are decisions made by funding panels monitored?

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The DH has called upon SHAs to think about how to effectively monitor and audit the use of the Fund.

SHAs have been asked to ensure that appropriate clinical audit arrangements are in place. SHAs have also been asked to provide basic financial monitoring information to the DH on a monthly basis.

## What happens if a constituent's application is turned down?

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Panels are expected to provide a clear reason for why a patient has been denied funding for a treatment. They will also need to ensure that cases can be reconsidered if more evidence becomes available about the effectiveness of a drug or if information has accidentally been overlooked in the first place.

Funding panels should also have a process in place to deal with appeals quickly because many cases will be of a time-sensitive nature.

## What will happen to NICE?

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NICE will continue to have primary responsibility for appraising new drug treatments while the Cancer Drugs Fund is operating and the NHS will still automatically fund any drug it approves.

Even when NICE is unable to approve a new drug because it is not cost effective, the evidence it gathers in its research will be extremely useful to regional panels when they make their decisions about spending their allocation of the Cancer Drugs Fund.

From 2014 onwards, NICE is also likely to play a key role in the Government's longer-term plans to introduce value-based pricing for new medicines.

## What will happen when the Cancer Drugs Fund stops operating at the end of 2013?

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The Government designed the Cancer Drugs Fund as a bridge to a value-based pricing model of funding for treatments on the NHS. By the beginning of 2014, when the Cancer Drugs Fund ends, the Government wants all medicines to be priced according to the 'value' they bring to patients and the NHS.

The Government's consultation on value-based pricing closed on 17 March 2011. The Department of Health's response is expected to be published over the summer.



## More information

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If you would like more information about the Cancer Drugs Fund, value-based pricing or Macmillan's campaign work, please call Lucy Grove on 020 7840 4947 or email [lgrove@macmillan.org.uk](mailto:lgrove@macmillan.org.uk)

Macmillan Cancer Support improves the lives of people affected by cancer. We provide practical, medical, emotional and financial support and push for better cancer care.

One in three of us will get cancer.  
Two million of us are living with it.  
We are all affected by cancer.  
We can all help. We are Macmillan.

Questions about living with cancer?  
Call free on 0808 808 00 00 (Mon–Fri 9am–8pm)  
Alternatively, visit [macmillan.org.uk](http://macmillan.org.uk)



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