

Nine months of COSD – first impressions

CTYA Workshop
December 2013
Trish Stokes

A recap - COSD

- New national cancer dataset – incorporates registration
- Whole patient pathway
- Aligned and rationalised with other cancer datasets
- Includes generic and site specific data
- Submitted monthly – most data from MDT systems and Path systems
- Monthly feedback
- **Phased implementation Jan 13 – Jan 15**

A recap – Cancer registration

- Separation of registration and analysis within PHE
- National Cancer Registration Service
- Single system (ENCORE) and processes
- Collate data from multiple sources
- Timely feedback
- Analysis by PHE Knowledge and Intelligence Teams and NCIN

Core dataset

- Referral through to treatment for all patients
- Initial Focus on :
 - Diagnosis
 - Basis of diagnosis
 - Performance status (for adults)
 - Contact with CNS
 - MDT discussion
 - Stage (TNM and site specific)

CTYA – Pathway data

- Specialty of referrer to specialist MDT
- Consultant at diagnosis – specialty and age specialism
- MDT at treatment decision - Age specialism of MDT/s discussing patient
- Age specialism of oncologist

CTYA – Patient data

- Symptoms first noted
- Primary diagnosis – additional information
- Secondary diagnosis
- Other significant diagnosis
- Familial cancer syndrome
- Stem cell infusion

CTYA – disease specific data

- ALL
- AML
- NHL
- Hodgkin Lymphoma
- Neuroblastoma
- Renal tumours/Wilms
- Rhabdomyosarcoma and other STS
- Osteosarcoma/Ewings
- Germ cell tumours
- Hepatoblastoma/Hepatocellular

Which dataset should we collect for patients under 25?

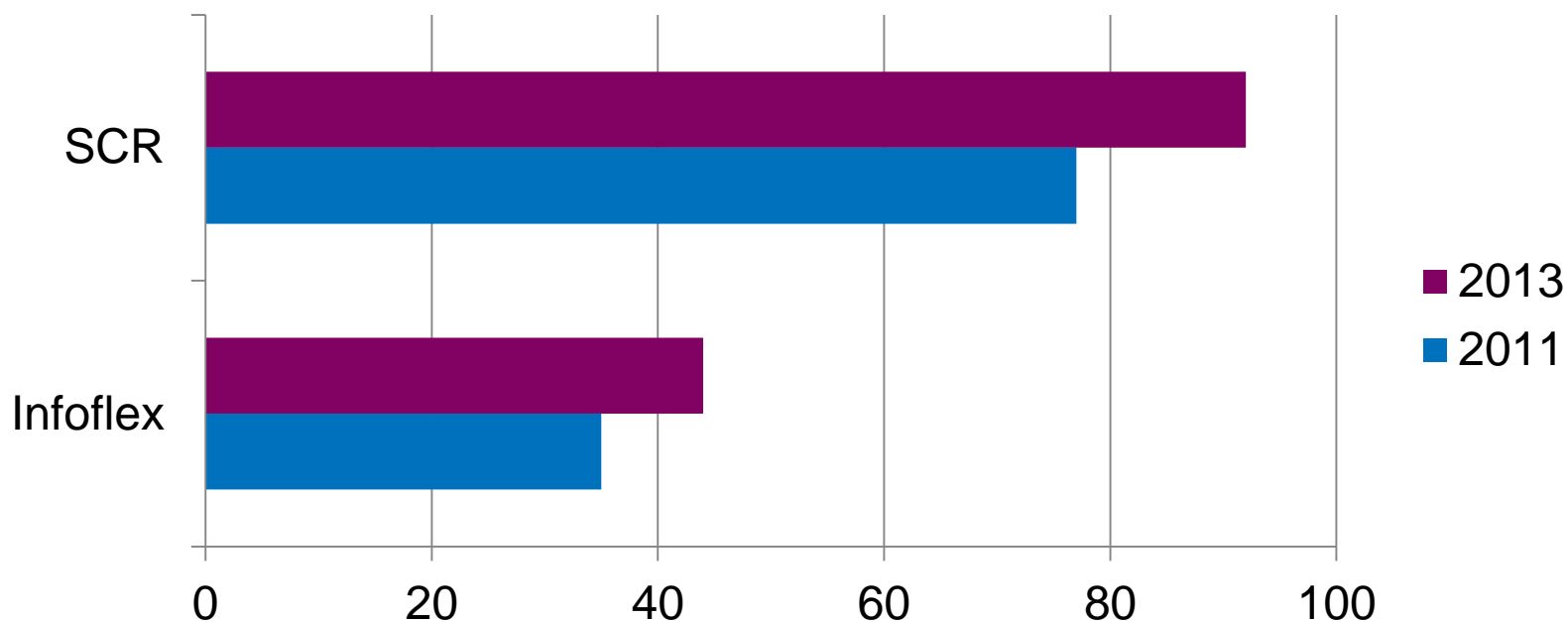
- Age specific MDTs (paediatric or TYA) at Principal Treatment Centres
 - Complete CTYA dataset (and existing registration process)
- Site specific MDTs
 - Complete site specific dataset AND IF PATIENT NOT REFERRED TO PTC
 - Age specific elements of CTYA dataset (pathway and patient)
- Disease covered by CTYA and site specific dataset
 - Only complete one set of site specific data
- Disease not covered by CTYA dataset
 - Complete site specific dataset AND
 - Age specific elements of CTYA dataset (pathway and patient)

Implementation progress

- Implementation led by NCRS
- Data Transfer Agreements signed with Trusts
- ~160 trusts submitting MDT data files
- Data liaison lead appointed to work with Trusts
- Reporting portal established – feedback on files received and key fields in raw data submitted
- Revision of reporting feedback in progress
- Registration feedback deferred to early 2014
- Oversight by COSD Governance Board

MDT systems in place

- 25% increase in use of two main systems



- Standard template for trusts with no system

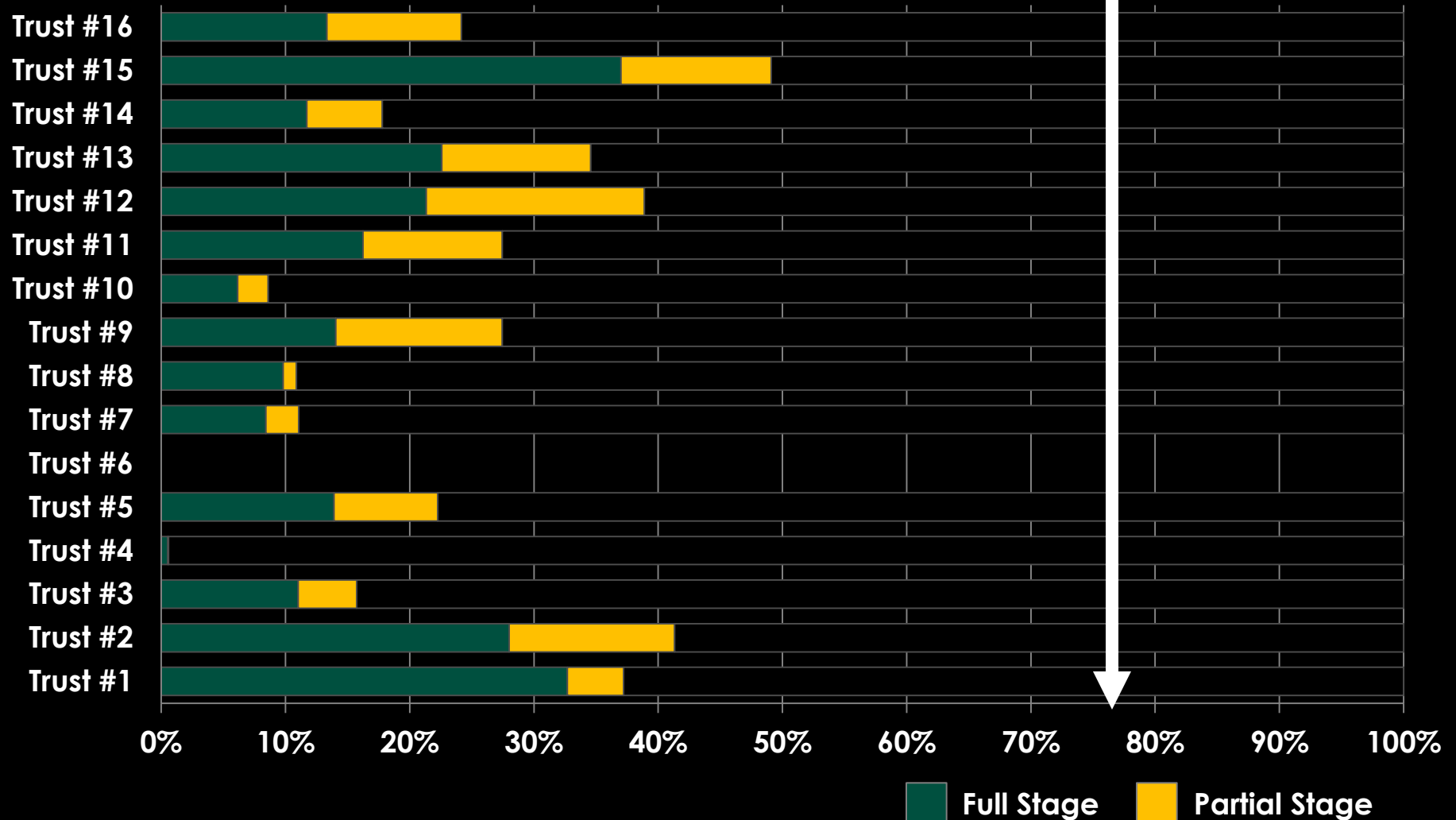
Data Liaison Team

- National lead appointed
- Officer at each branch office
- Working with Trusts to improve data quality and completeness
- Concentration on key fields to start with – eg stage completeness

London Cancer Alliance

Staging Completeness 2011 / 2012

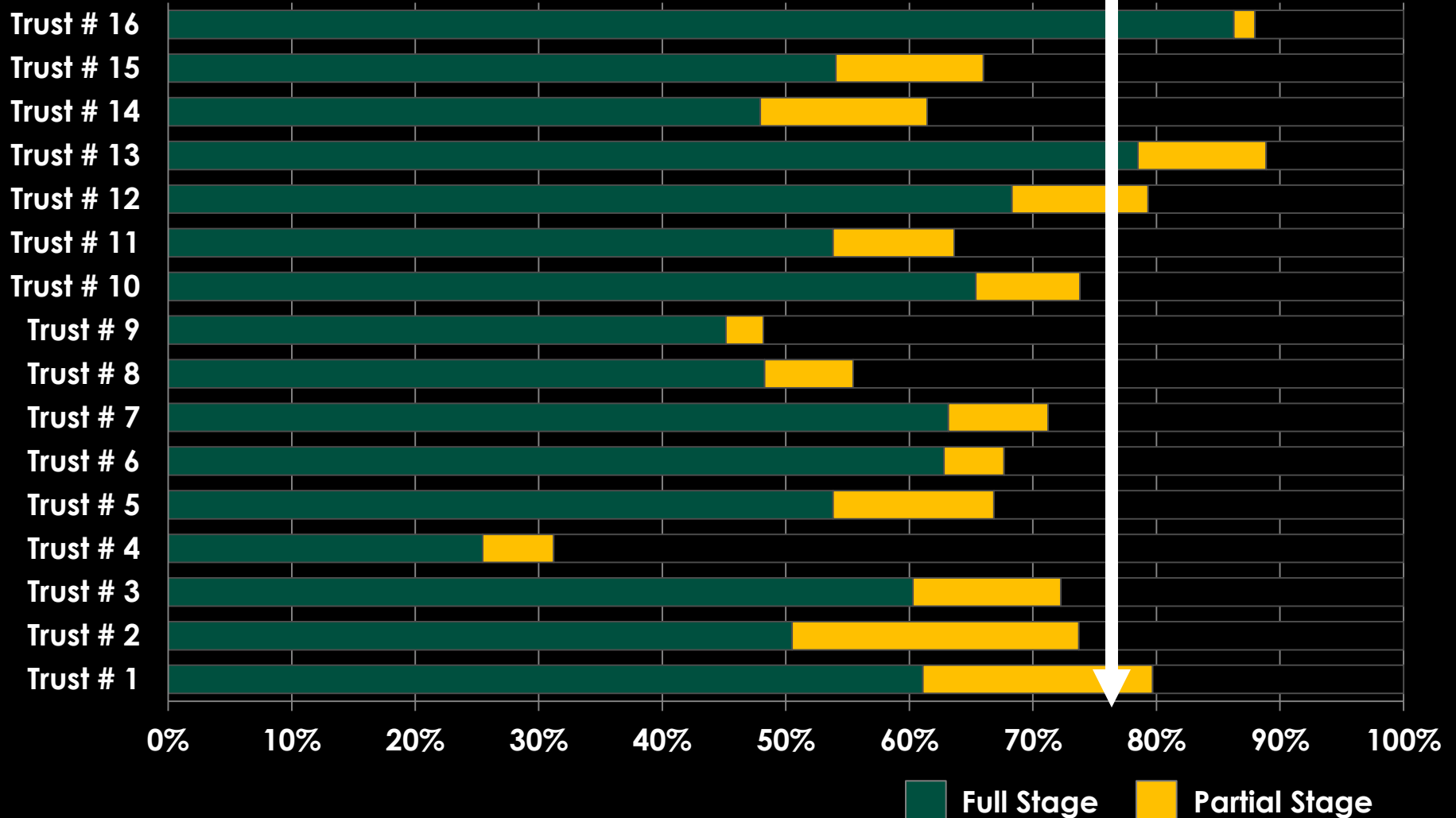
70% Target



London Cancer Alliance

Staging Completeness 2012 /2013

70% Target



Reporting feedback

- Reporting portal
 1. Fact of submission (files)
 2. Data Quality (raw data)
 3. Quality assurance (processed data)

- Analytical reports - led by NCIN
 4. Clinical analysis (processed/summarised data)

Reporting portal

<http://cosd.ncr.nhs.uk/>

The screenshot shows the 'Cancer Outcomes and Services Dataset (COSD) Conformance Monitoring Feedback Portal' in an Internet Explorer browser window. The address bar shows the URL 'http://cosd.ncr.nhs.uk/node/35'. The page has a blue header with the title and navigation links 'Home' and 'Request Account'. A sidebar on the left lists 'Conformance Reports' for various dates from 01-2013 to 07-2013. The main content area is titled '06-2013 Level 1 and 2' and includes submission details, a purpose statement, and a list of items covered by the reports.

Internet Explorer cannot display this page
http://cosd.ncr.nhs.uk/node/35

06-2013 Level 1 and 2 | Can...

File Edit View Favorites Tools Help

Civil Service Learning Ho... Web Slice Gallery

My account Log out

Cancer Outcomes and Services Dataset (COSD) Conformance Monitoring Feedback Portal

Home Request Account

Home

Conformance Reports

- 01-2013 Level 1 and 2
- 02-2013 Level 1 and 2
- 03-2013 Level 1 and 2
- 04-2013 Level 1 and 2
- 05-2013 Level 1 and 2
- 06-2013 Level 1 and 2
- 07-2013 Level 1

06-2013 Level 1 and 2

Submitted by miles.smith on Tue, 08/06/2013 - 15:42

COSD Level 1 and Level 2 Conformance Reports

Submission due date:
02.08.2013 for 06.2013 diagnosis/treatment

Purpose: Provide feedback according to the COSD Conformance Framework

These reports cover:

Level 1:

- Whether the file was as agreed in the DTA
- Whether the file was received on time
- Whether the file was received in the correct format

100% 18:46 24/09/2013

Level 1 – Submission

Level 1 reporting deadline for this data: close of play on 06.08.2013

Level 2 reporting deadline for this data: close of play on 30.08.2013

Report generated: 30.08.2013 16:54

Registry / Provider	Source type	L1.1 conformance <i>Agreed files received?</i>	L1.2 conformance <i>Plans for exceptional circumstances?</i>	L1.3 conformance <i>File received by due date?</i>	L1.4 conformance <i>File in COSD compliant format?</i>	Level 2 reports
NCRS NORTHERN AND YORKSHIRE BRANCH (Y0201)						
AIREDALE NHS FOUNDATION TRUST (RCF)	MDT (COSD XML/compliant)	Yes	Yes	Yes	Yes	Level 2
	PATHOLOGY			Yes	N/A	[2]
BRADFORD TEACHING HOSPITALS NHS FOUNDATION TRUST (RAE)	MDT (COSD XML/compliant)	Yes	Yes	Yes	Yes	Level 2
	PATHOLOGY			Yes	N/A	[2]
CALDERDALE AND HUDDERSFIELD NHS FOUNDATION TRUST (RWY)	MDT (COSD XML/compliant)	Yes	Yes	Yes	Yes	Level 2
	PATHOLOGY			Yes	N/A	[2]
CITY HOSPITALS	MDT (COSD XML/compliant)	Yes	Yes	Yes	Yes	Level 2

Level 2

– Data quality – raw data

- By MDT/Tumour group and Provider for month of diagnosis (invasive and non invasive)
- Available within **one month** of submission
- For Trusts submitting in XML format

Extract from current Level 2 Report

L2.3d	Breakdown of stage by tumour group and percentage with completed stage grouping						
	Diagnosed	% Staged	Stage 1	Stage 2	Stage 3	Stage 4	Other Stage
Brain/Central Nervous System (invasive)	19	0%	0	0	0	0	0
Breast (invasive)	84	26%	0	0	0	0	22
Colorectal (invasive)	75	41%	0	0	0	0	31
Gynaecological (invasive)	62	79%	32	5	5	7	0
Haematological (invasive)	58	12%	1	2	2	2	0
Head and Neck (invasive)	29	62%	2	0	0	0	16
Lung (invasive)	108	81%	0	0	0	0	88
Sarcoma (invasive)	13	8%	0	0	0	0	1
Skin (invasive)	92	36%	5	2	1	0	25
Upper Gastrointestinal (invasive)	76	34%	0	1	1	0	24
Urological (invasive)	147	17%	7	1	0	0	17
Other (invasive)	31	55%	0	0	2	2	13

Reporting feedback developments

- Revised feedback reports in progress (Level 1 and 2)
- Changes to be shown over time
- Separate online reports for each tumour group
- Revised tumour groupings and total by Trust
- Compiled registrations (Level 3) – deferred to early 2014
- *How do you want to get feedback?*

Conformance/Reporting feedback – key fields

- Diagnosis (ICD10 and morphology)
- Basis of diagnosis
- Stage
- Performance Status (adults only)
- *Clinical Nurse specialist (to be added)*
- Treatments

*Other key fields to be agreed with clinical teams
(Discussions with CTYA in progress)*

Proposed groupings for CTYA reports?

- ***Under 16***
- ***16 – 18***
- ***19 -24***

Maintenance and ISB process

- Maintenance led by NCIN
- Regular Newsletter, User Guide and website
- Annual revision to keep dataset up to date
- Complex dataset – not quite got it right yet for CTYA!
- Latest revisions –approved by ISB
- Standardisation of size measurements to 2dp
 - New fields for Report groupings to align with CCGs
 - Other minor amendments for clarity and current practice
 - SNOMED CT pilot project
 - Procedure codes and Path T and M fields
- Formal change request process through COSD helpdesk
- Development of Level 4 reports

Level 4 - Clinical reports

- NCIN leading
- Development deferred to 2014
- Consultation with clinical teams
 - SSCRGs
 - Network site specific groups
- Need to align with
 - Service profiles
 - Peer review clinical lines of enquiry
 - Commissioning and SCNs
 - National and professional body audits

Online learning for non clinical staff

The screenshot displays the NCIN website interface. At the top, there are two banners: 'Understanding Cancer' on the left and 'Oncology Training for NHS and Public Health non-clinical staff' on the right. Below these is a browser window showing the NCIN homepage. The homepage features the NCIN logo, a search bar, and a navigation menu. Three red circles highlight specific content: the 'Cancer Outcomes Conference 2014' event, the 'Health Intelligence Networks' section, and the 'Understanding Cancer e-learning' module. The 'e-learning' module is further detailed in a separate window titled 'Launched Modules'.

Understanding Cancer
Oncology Training for NHS
and Public Health non-clinical staff

Launched Modules

Cancer Surveillance	Lower Gastrointestinal Tract
National Health Service	Paediatric, System and Malignancies

http://www.ncin.org.uk/home

phe.gov.uk NCIN Homepage

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Page Safety Tools

NCIN
national cancer
intelligence network
Using information to improve quality & choice

About NCIN News and Events Collecting and Using Data Publications Cancer Information Tools Cancer Type and Topic Specific Work

Cancer Outcomes Conference 2014
9th and 10th June
Hilton Birmingham Metropole

Health Intelligence Networks
The NCIN model is being followed in the development of other Health Intelligence Networks. Find out more

Routes to diagnosis
Routes and relative survival for cancers diagnosed in England in 2006-2008

Understanding Cancer e-learning
Oncology training for NHS non-clinical staff

National Cancer Intelligence Network

100%



Cancer Outcomes Conference
9 & 10 June 2014
Hilton Birmingham Metropole

www.ncin.org.uk/conference



ukiacr
United Kingdom and Ireland
Association of
Cancer Registries



NCIN
national cancer
intelligence network

Using information to improve quality & choice

The Cancer Outcomes Conference 2014 will explore the ‘power of information’ both locally and nationally.

It will examine how UK-wide cancer registration data and other health related datasets are being exploited to reduce cancer incidence, mortality and morbidity.

To find out more, visit www.ncin.org.uk/conference



@NCIN_PHE
#NCIN2014



NCRI
National
Cancer
Research
Institute

Summary

- NCRS leading implementation
- NCIN leading maintenance and ISB
- Making good progress
- Reporting feedback under revision
- Summary reports early next year
- Analytical reports later next year
- Communications and support for clinical teams
 - NCRS Data Liaison team
 - COSD Newsletter and website
 - Online learning
 - Re-establish links following changes to structure

Thank you

Queries to: cosd@ncin.org.uk