

Cancer Outcomes and Services Dataset

Thyroid Workshop May 2011

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NCIN core objectives



- Promoting efficient and effective data collection throughout the cancer journey
- Providing a common national repository for cancer datasets
- Producing expert analyses, based on robust methodologies, to monitor patterns of cancer care
- Exploiting information to drive improvements in standards of cancer care and clinical outcomes
- Enabling use of cancer information to support audit and research programmes



Cancer Datasets

- Sept 2012



- Cancer Registration Dataset mandated for several years
- Going Further on Cancer Waits Jan 2009
- Radiotherapy April 2009
- Chemotherapy (SACT) April 2012
- Diagnostics Project April 2012
- Recurrent/Metastatic Breast Cancer April 2012
- Cancer Outcomes and Services Dataset Sept 2012
- (RC Pathology Professional/Clinical Standards)
- (RC Radiology Professional/Clinical Standards)
- National Audits



COSD features



- The new national cancer dataset
- Components
 - Core (Registration and Cancer Waits)
 - Site specific (cf nat audit)
 - Key pathology (core RCPath)
- Secondary uses
- From clinical patient management
- Aligned and standardised
- Multiple data sources
- Monthly submission
- Monthly feedback



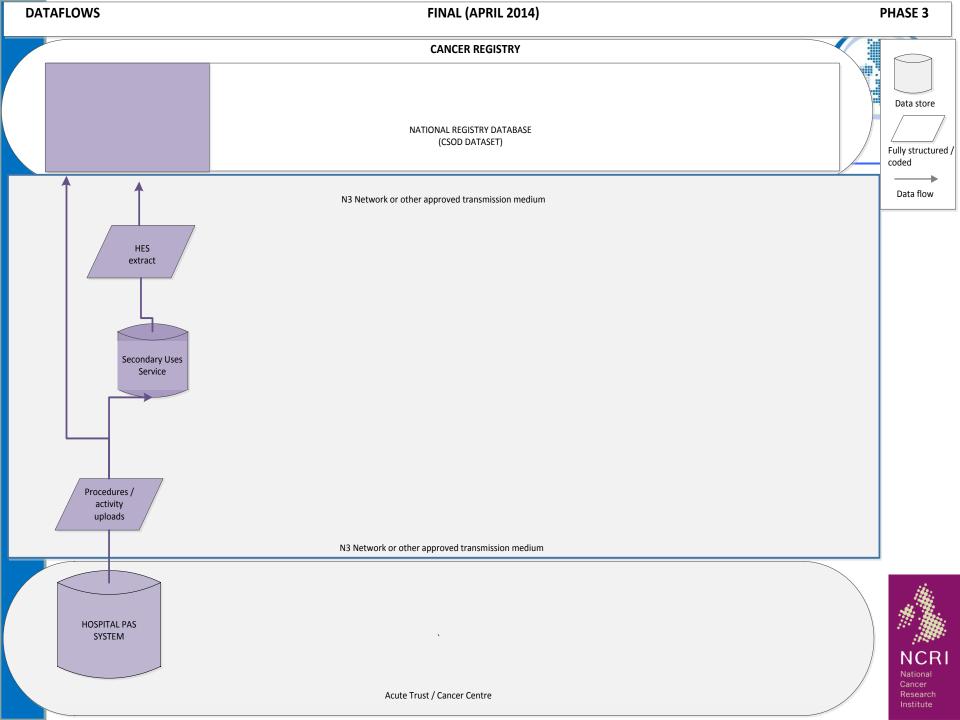
COSD Dataset

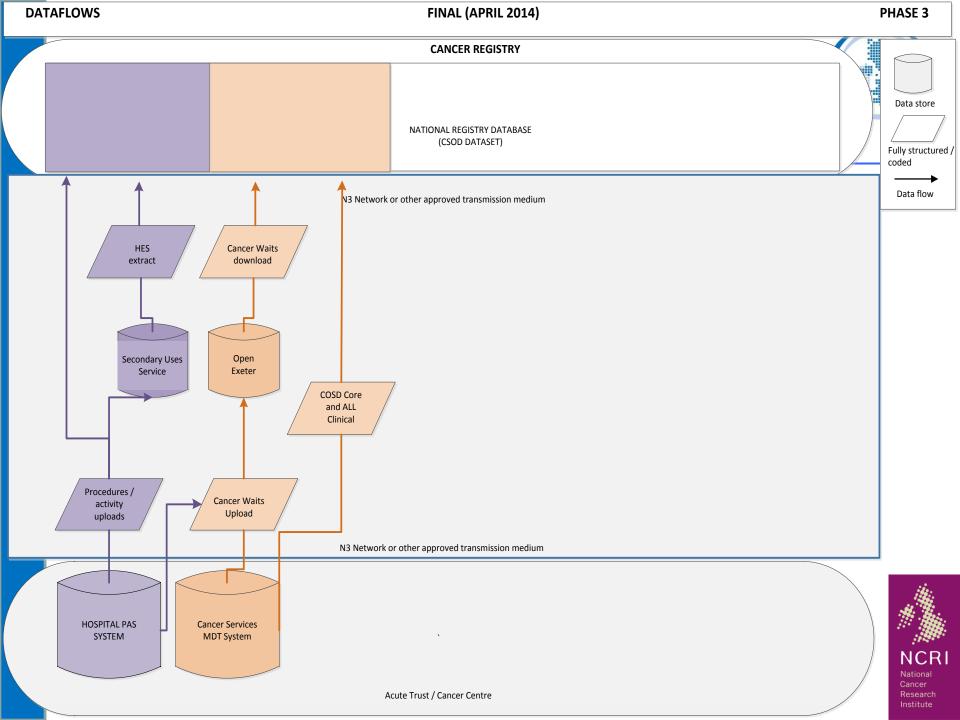


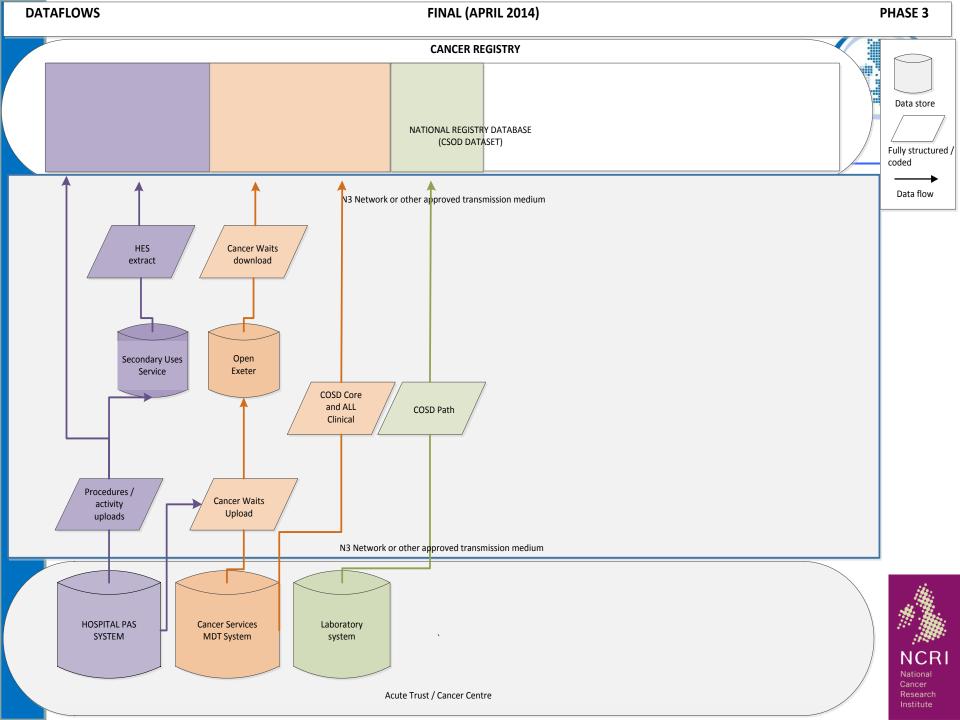
Dataset Section	COUNT
Core (with additions)	143
Breast	30
CNS	16
Colorectal	30
CTYA	66
Gynae	41
Haematology	60
Head & Neck	44
Lung	19
Sarcoma	16
Skin	70
Upper GI	166
Urology	30
	731

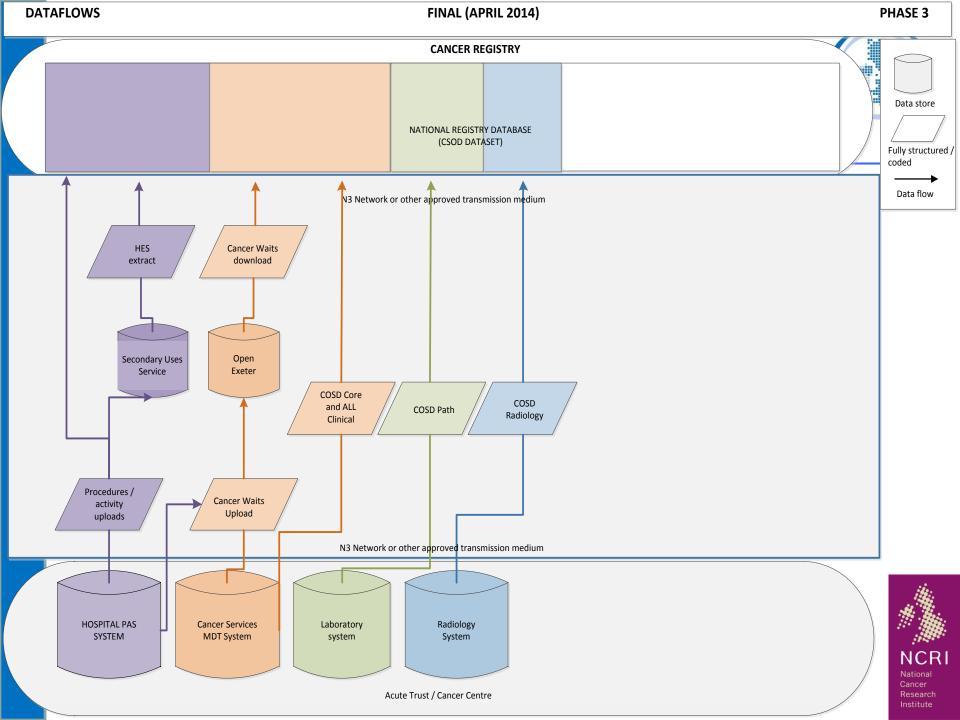
NCRI National Cancer

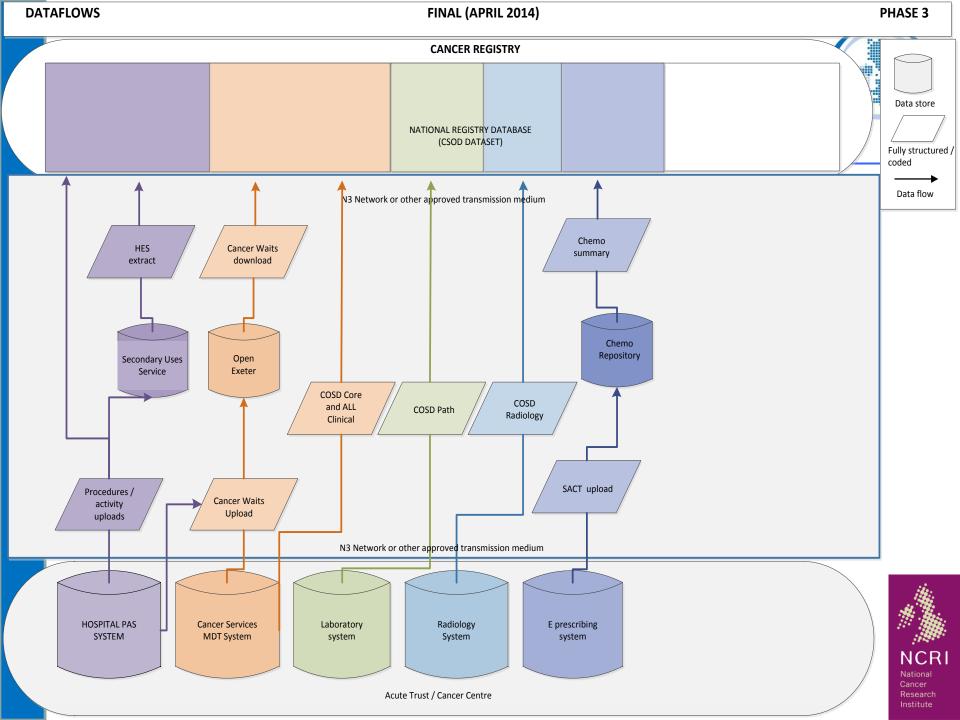
COSD

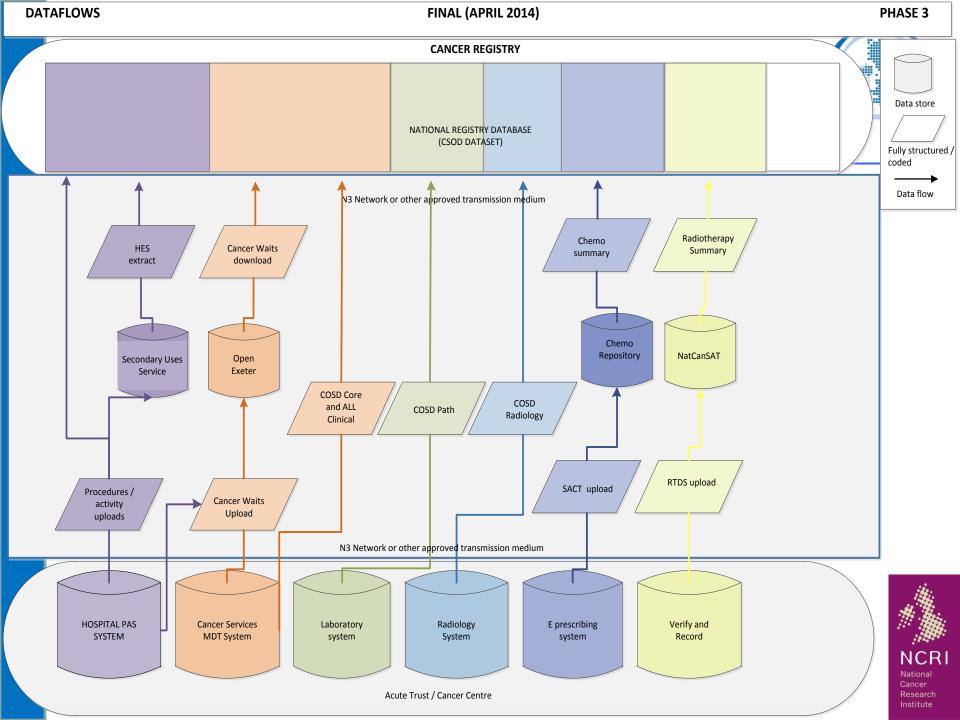


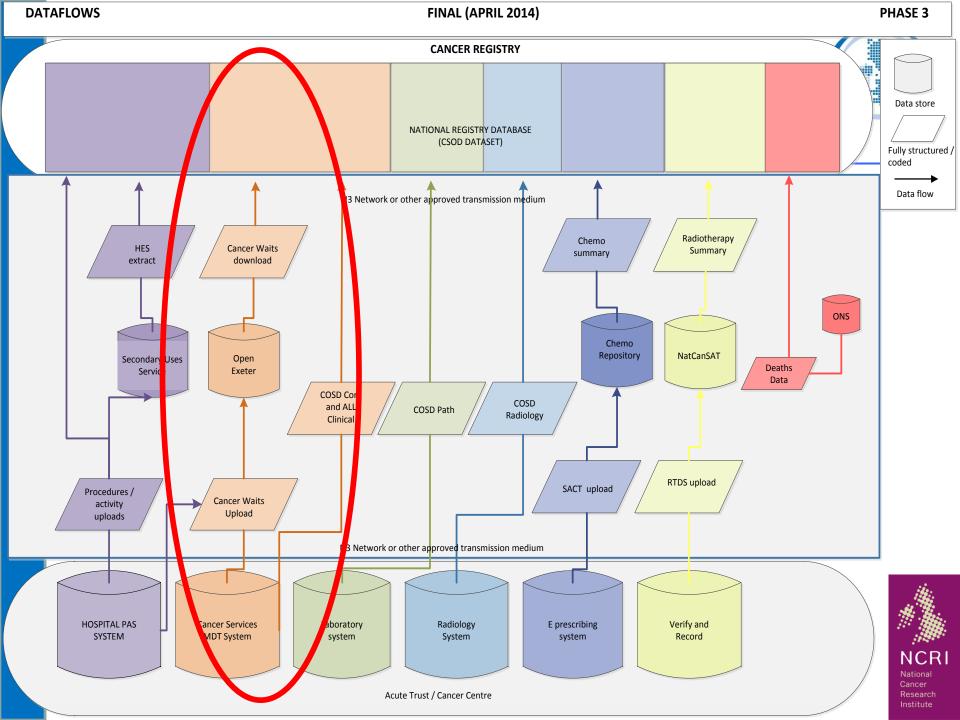












Essentials for success



- Clinical engagement
- Credible data
 - High level of data completeness
 - Case mix adjustment
 - Timely
- Reporting
 - Easy access to clear, 'bespoke' reports
 - 'Real time' on line; Annual reports
 - Targeting reports: Clinicians; Trusts; SHAs; PCTs etc
- Dissemination in Peer-reviewed settings
 - Publication, Conferences, Workshops, etc
- Incorporating performance and outcome data into:
 - Commissioning
 - Cancer Peer Review & Service Improvement



The last twelve months



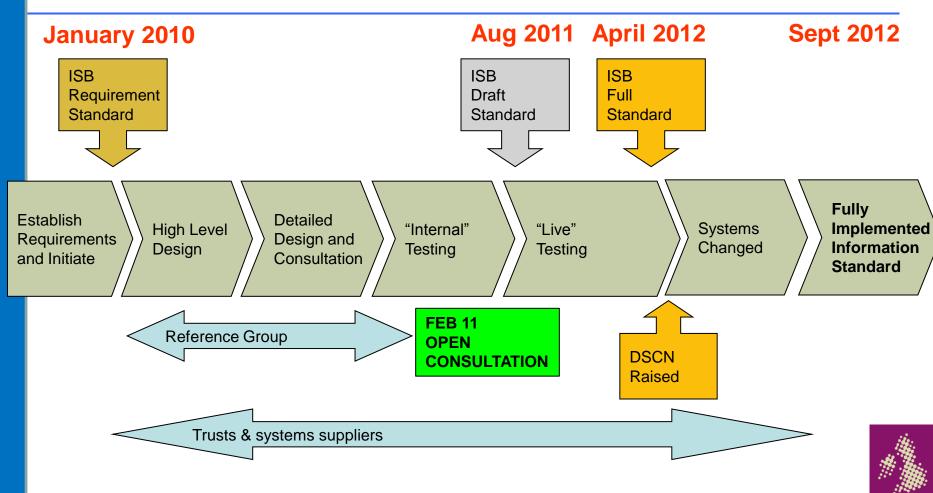
- First draft COSD dataset
 - Core dataset reviewed
 - Additional core items identified
 - Site specific datasets agreed by Clinical Reference Groups
- MDT Software Suppliers Day
- Work begun with RC Pathologists and RC Radiologists on clinical content
- Definitional testing (incl key path for staging)
- Open consultation



ISB Process – Where are we now?



Institute



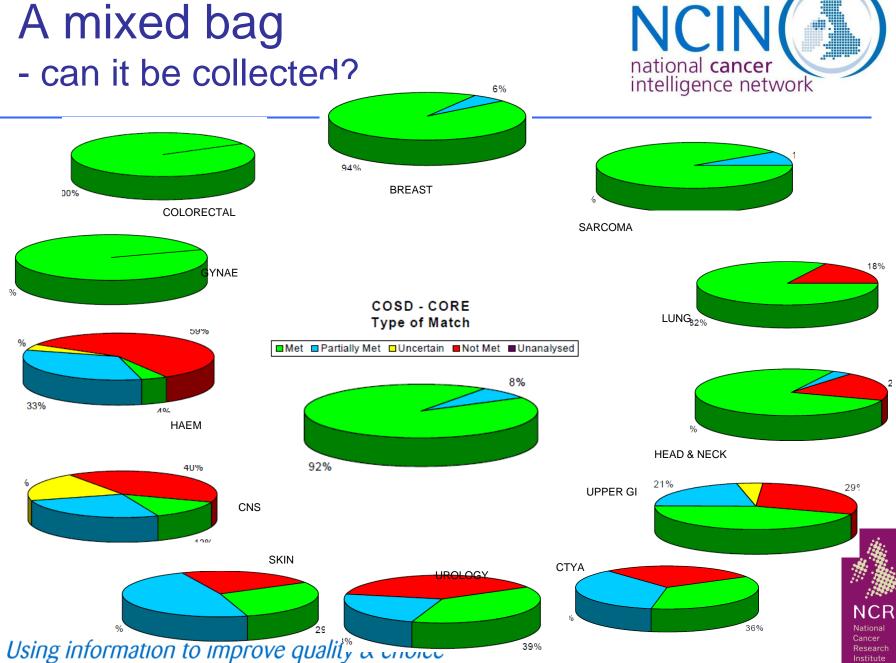
Definitional testing – general feedback



- Support for
 - cohesive and consistent dataset
 - clear and comprehensive guides
- Concerns
 - increased burden of collection
 - need for clinical involvement



A mixed bag



Phased implementation – which approach

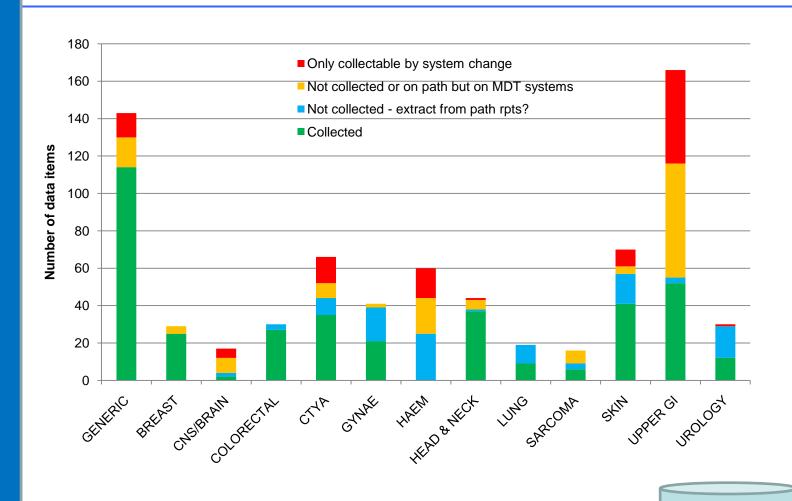


- By Trust?
- By Tumour site?
- By data item?



Implementation - State of readiness







Next Steps...



- Pilot data collection with Trusts
 - How easy to collect?
 - Changes to processes
 - Data quality and completeness
 - Validation
 - Other sources
- Documents for draft ISB submission
- Approach to implementation



Challenges...



- Implicit to explicit
- Time for recording
- Clinical buy-in
- Clinical validation
- Specific issues co-morbidity, stage and pathology

If we get this right - minimal impact on the service But maximum impact on improving care

MDT input and meeting are critical to success



Useful links



NCIN

www.ncin.org.uk

trish.stokes@nhs.net

Driley@nhs.net

NHS Information Centre (dataset)

Datasets@ic.nhs.uk

