

New sources of data and how it can support commissioning

Lung Clinical Leads Workshop
April 2012

Trish Stokes,

COSD Programme Manager NCIN



Overview



New datasets

- SACT
- DID
- COSD

COSD

- What is it
- Why
- When
- How will it affect you?

Chemotherapy – SACT (1)



- ISN from April 2012 (ISB 1533)
 - All patients receiving cancer chemotherapy
 - Adult solid & haematology
 - Paediatric
 - Phased implementation until April 2014
 - Clinical sign-off

Diagnostic Imaging Dataset



- ISN from April 2012 (ISB 1577)
 - To provide information about access of NHS patients to diagnostic imaging tests across the country
 - All diagnostic imaging tests carried out on NHS patients
 - Monthly submissions from local RIS systems
 - Patient level
 - NO RESULTS
 - Access for Cancer Registries

What is COSD?

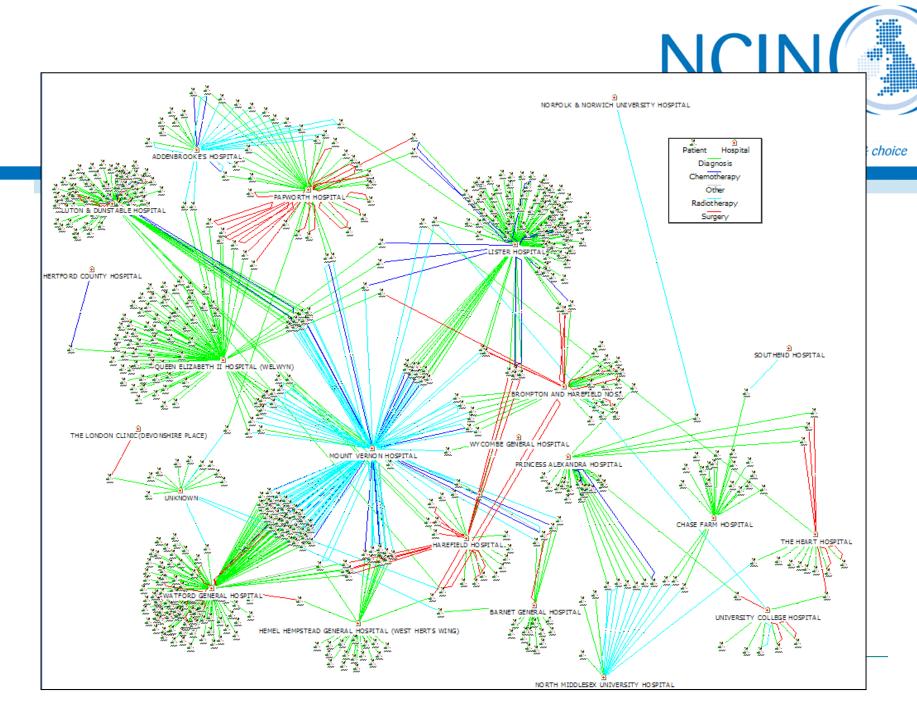


- The new national cancer dataset
 - Updated, aligned and standardised
- The new Cancer Registration dataset
 - Compiled dataset (assembled by Registries)
 - Defines data for direct submission by Trusts
 - All registerable conditions (eg in situ MM, benign brain tumours)
 - Wider than CWT patient pathway for all cases
- Components
 - Core (Generic Registration and Cancer Waits)
 - Site specific clinical (cf nat audit)
 - Site specific Key pathology (RCPath MDS)

What is COSD?



- Monthly submission
 - Replaces current registry submission
 - Avoid duplication of other dataflows
 - Multiple sources within and across Trusts
 - Via XML
- Monthly feedback
 - Standard reports
 - Feedback to commissioners



Cancer Registration Modernisation Programme



- To provide 'timely' comprehensive
 - Data collection and quality assurance
 - over the entire cancer care pathway for
 - all patients treated in England (& UK)
- Resource for
 - patient care, treatment variations
 - quality, safety and performance management
 - audit, research and outcome analyses
- Increased focus on:
 - Stage, radiology, standard datasets, timeliness

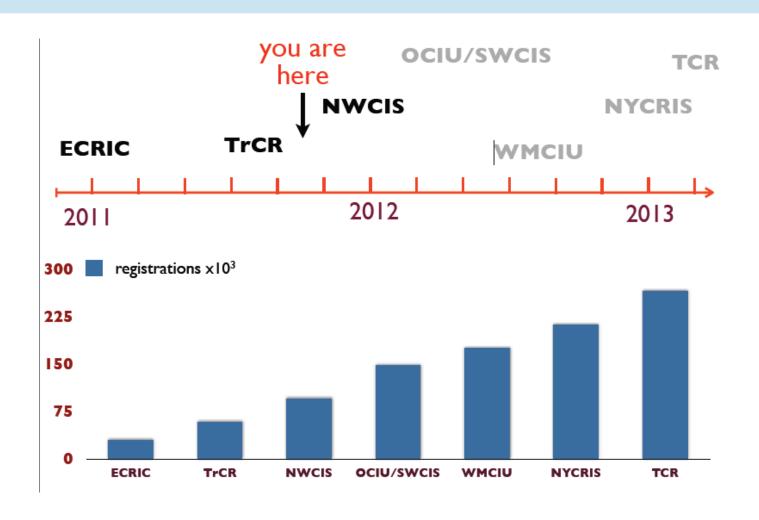
Modernisation of Cancer Registration

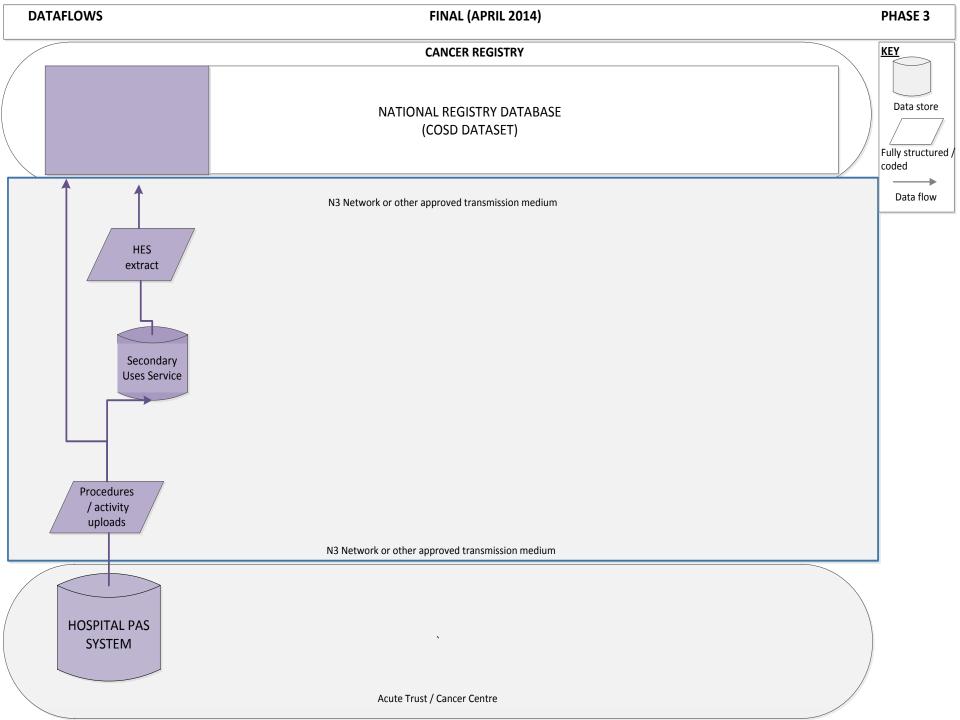


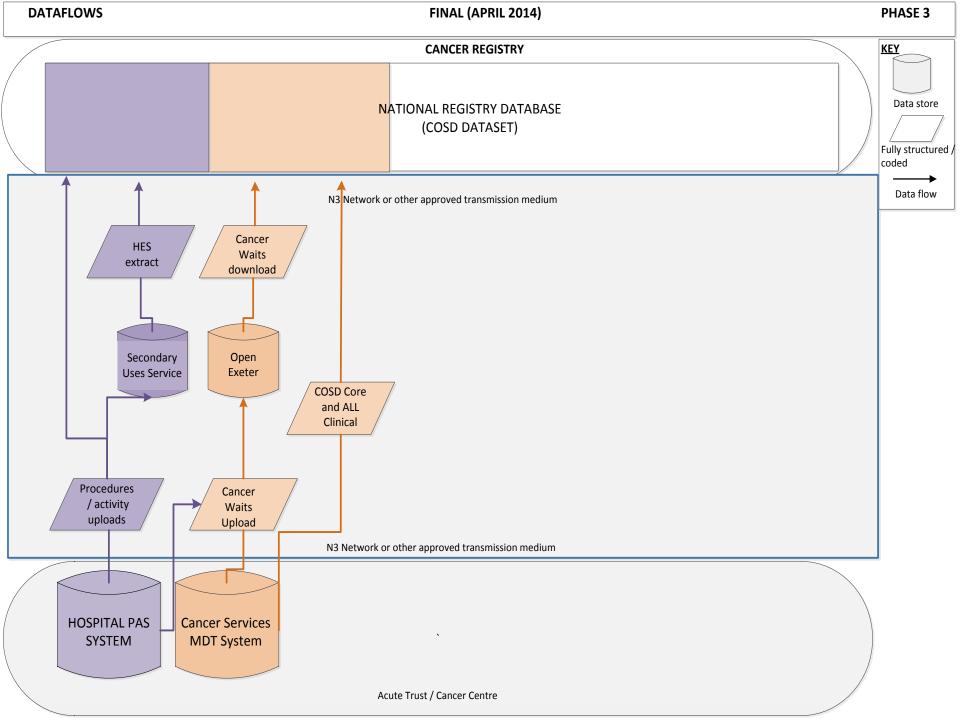
- By 2013 all 8 English Cancer Registries to be using one single database system:
 - Reduce duplication
 - Data along patient pathway (inc rec/mets)
 - Using national data feeds e.g. GFoCW, HES, RTDS
 - Multiple Local data sources eg MDTs, pathology systems
 - Increased timeliness
 - Regular 'progress' reports to MDTs/trusts

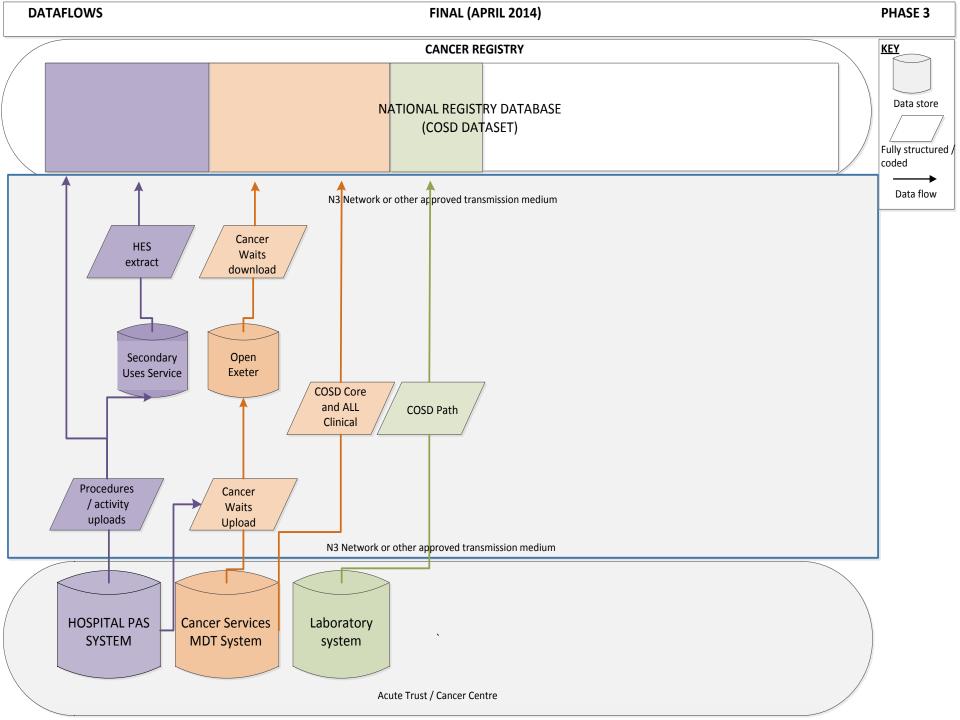
Migration Plan UPDATE

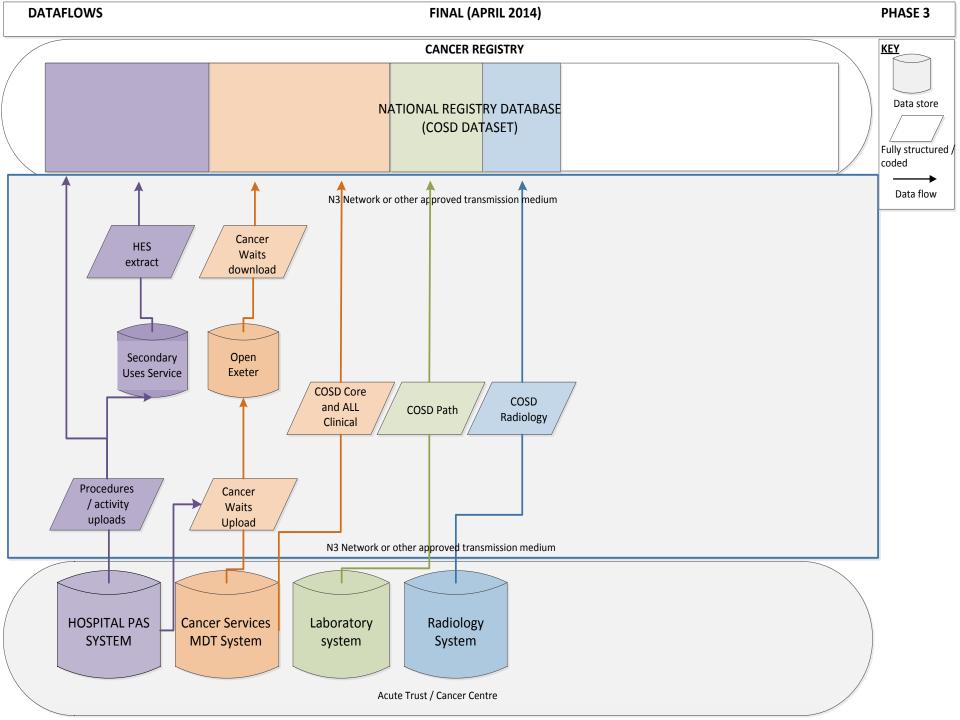


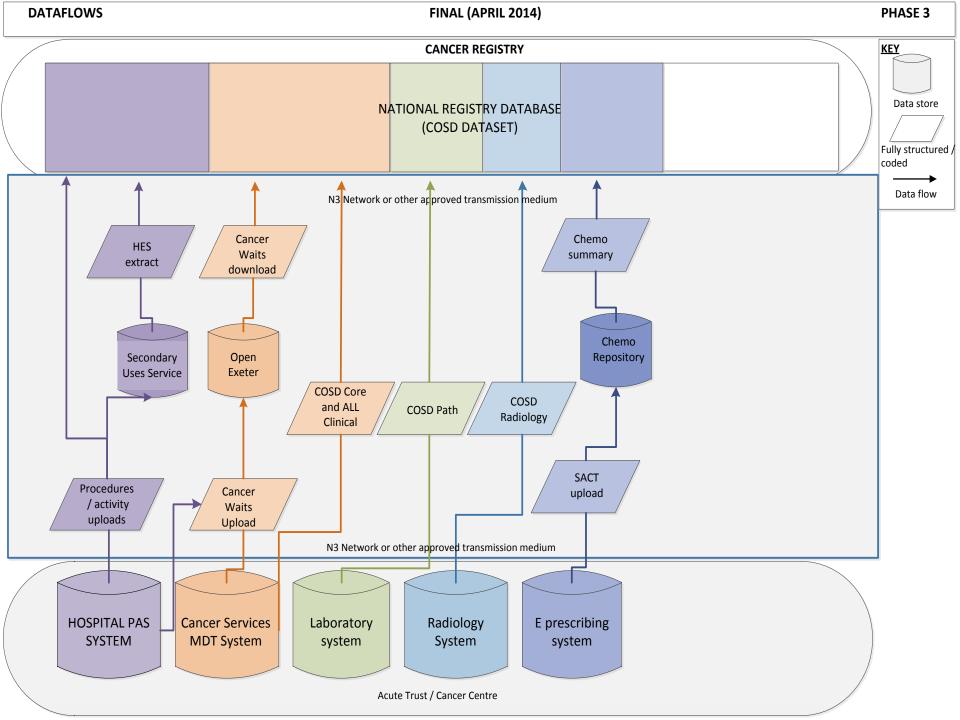


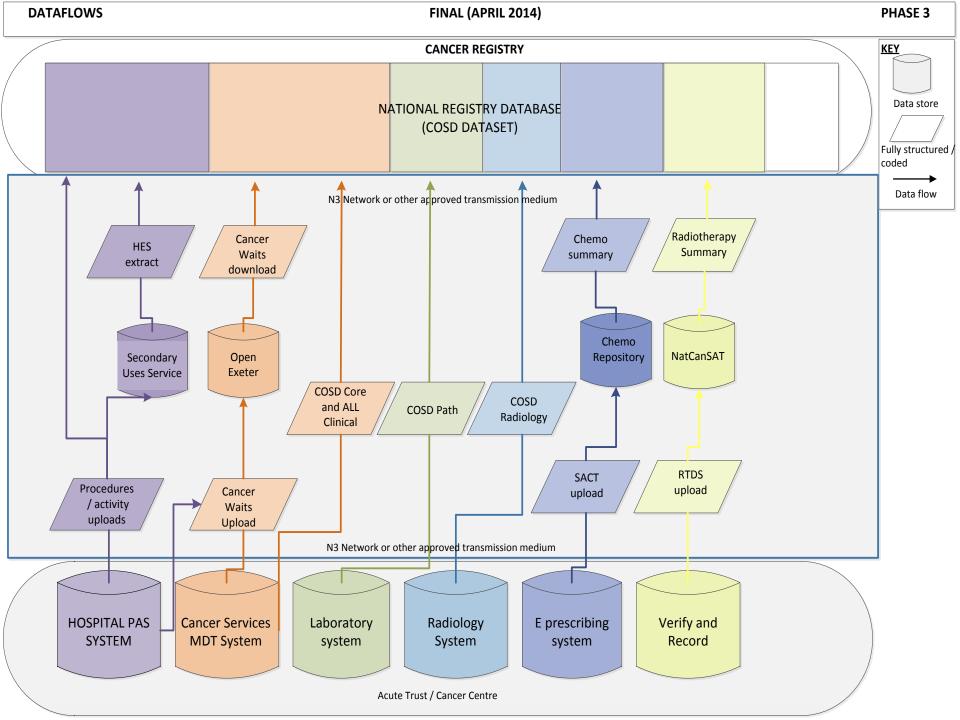


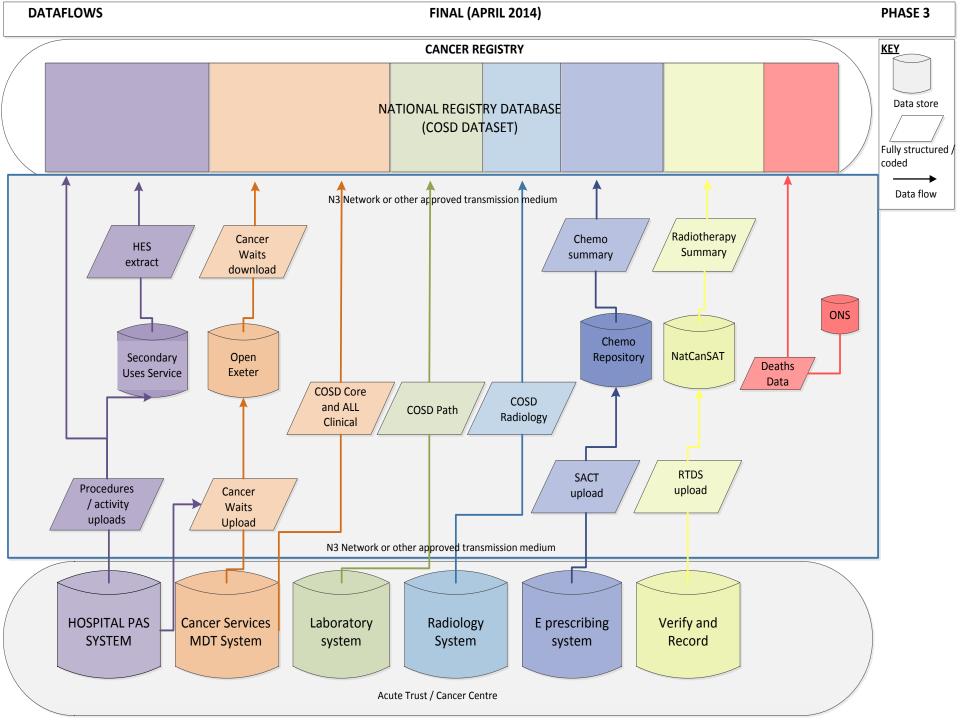






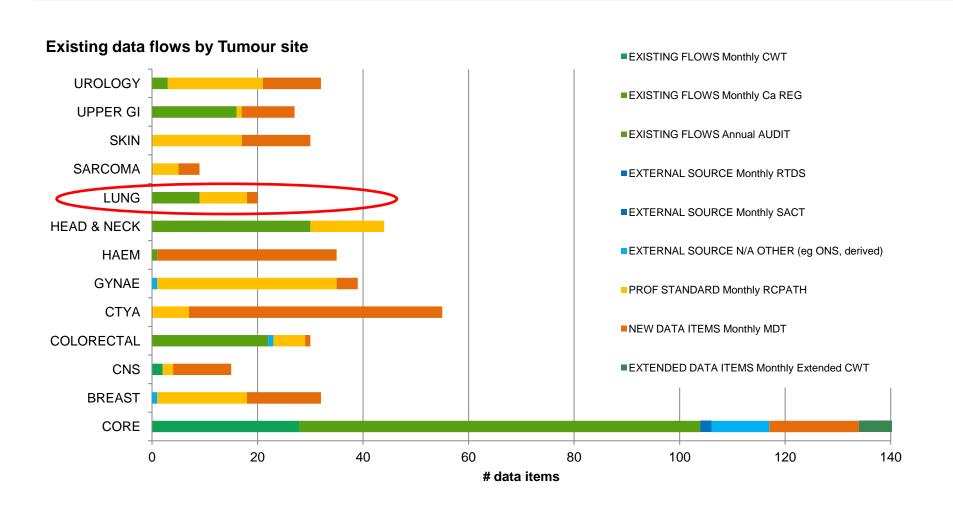






COSD - new dataset?





Operational Testing - Lung



Overall COSD Pilot Ratings: Lung								
Stage 2: All Lung Data Items Rated								
Data Item	Ease of Collection RAG Rating	Completeness RAG Rating	Overall RAG rating	Stage 1: National Audit completeness returns				
Smoking Status		18% (24/137)						
Mediastinal Sampling Indicator		0% (0/137)						
Epidermal Growth Factor Receptor Mutational Status		0% (0/137)						
Scan Performed Indicator (CT) - Lu10020								
Procedure Date (CT Scan) - Lu10000								
Scan Performed Indicator (PET) - Lu10030								
Procedure Date (PET CT Scan) - Lu10010								
Bronchoscopy Performed Indicator - Lu10080								
Procedure Date Bronchoscopy - Lu10070								
FEV 1 Percentage - Lu10040								

Implementation Timetable



- Core and stage from January 2013, by end June 2013
- Site Specific from July 2013 & by end 2013
- Site specific Pathology from Jan 2014 & by end 2014

Impact on Current



NO CHANGE

(NO CHANGE)

(Audit strategy under

development)

Monthly via XML (or current

process)

(NO CHANGE)

Cancer	Datasets	national cancer intelligence network		
Current dataset	Submission frequency	New Dataset (From JAN 2013)	Submission frequency and type	
NCDS	None (reference only)	Replaced by COSD	Monthly via XML	
Cancer Registration	monthly	Replaced by	Monthly via XML	

monthly

In progress

Annual (various date ranges and

deadlines)

None

(Professional reporting standard

only at present. Project to develop clinical standards)

None

(Recommendations in place for

clinical use - no MDS. Pilot in

progress for proforma based

COSD

NO CHANGE

NO CHANGE

(SACT from April

2012)

? NO CHANGE

(some items also

in COSD)

(COSD - subset

only)

? No change

(DIDS will collect

activity data)

Dataset

RTDS (Radiotherapy)

Chemotherapy SACT

RC Pathology – Minimum

RC Radiology – no minimum

datasets at present

National Audits

datasets

Issues for Lung

- Impact on LUCADA?
- Ownership
- Resources
- Duplication
- Error management
- Future





- Aligned with audit
- Bigger picture
- Standardised collection more effective
- Processes clinical signoff
- Timeliness diagnosis, treatment and updates
- Monthly feedback
- ?Current error reports Problem data resolved earlier
- Strategic direction targeted audits?

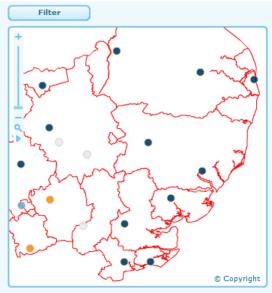
Support



- Go Live January 2013 (subject to ISB)
 - 'State of Readiness'
 - CN Road shows from mid-Summer
 - Organisational & technical topics
 - MDTs & clinical aspects

MDT Performance – Data completeness





This report shows the completeness of certain key data items received each month by a Trust as discussed at MDT. By clicking on your Trust from the map above all the relevant data will appear on the performance chart to the right. You can compare your Trust to another by holding the Ctrl button and selecting another Trust. You can scroll the data down on the right hand side by hovering over the data and using the mouse wheel or holding the scroll bar (far right) and moving down/up. A full user guide is available by clicking the link on the introduction page; this will give you detailed instructions on how to use this report effectively.

Indicator	Hospital	Total Pts	Current Month %	Last Month %	Trend	Data Completeness	
Date of Diagnosis: Aug-10	E+N Herts	16	100	94.40	1	0	100
Date of Diagnosis: Aug-10	West Herts	8	100	100.00	_	0	100
Pre-Treatment TNM: Aug-10	E+N Herts	16	0	0.00	-	0	100
Pre-Treatment TNM: Aug-10	West Herts	8	0	0.00	_	0	100
Stage - Dukes: Aug-10	E+N Herts	16	50	44.40	1	0	100
Stage - Dukes: Aug-10	West Herts	8	0	0.00	_	0	100
Final Treatment TNM: Aug-10	E+N Herts	16	0	27.80	1	0	100
Final Treatment TNM: Aug-10	West Herts	8	12.5	28.60		0	100
▼ Lung Cancer							
Date of Diagnosis: Aug-10	E+N Herts	13	92.3	93.80	_	0	100
Date of Diagnosis: Aug-10	West Herts	12	100	100.00	-	0	100
Tumour Laterality: Aug-10	E+N Herts	13	92.3	68.80	1	0	100
Tumour Laterality: Aug-10	West Herts	12	75	90.90	1	0	100
Pre-Treatment TNM: Aug-10	E+N Herts	13	0	18.80		0	100
Pre-Treatment TNM: Aug-10	West Herts	12	25	72.70	1	0	100
▼ Skin - C43							
Date of Diagnosis: Aug-10	E+N Herts	17	100	86.70	1	0	100
Date of Diagnosis: Aug-10	West Herts	9	100	100.00	_	0	100
Breslow Thickness: Aug-10	E+N Herts	17	0	0.00	_	0	100
Breslow Thickness: Aug-10	West Herts	9	0	0.00	_	0	100
Final TNM: Aug-10	E+N Herts	17	0	0.00	_		
Final TNM: Aug-10	West Herts	9	0	0.00	_		
▼ Upper GI							
Date of Diagnosis: Aug-10	E+N Herts	5	80	85.70	1	0	100
Date of Diagnosis: Aug-10	West Herts	4	100	100.00	_	0	100
Pre-Treatment TNM: Aug-10	E+N Herts	5	0	0.00	_	0	100
Pre-Treatment TNM: Aug-10	West Herts	4	0	0.00	_	0	100
▼ Pancreatic Cancer							
Date of Diagnosis: Aug-10	E+N Herts	1	100	100.00	_	0	100
Date of Diagnosis: Aug-10	West Herts	0	n/a	n/a	_	0	100
Pre-Treatment TNM: Aug-10	E+N Herts	1	0	0.00	_	0	100
<-5% Decrease -2% to Regional Average % Poor Good Good G		to -1% No char	nge = 2% to 5% In	crease 👚 <5% In	crease 👚	A ● B ● C ●	





Oncology Training for NHS and Public Health non-clinical staff

Professionally Accredited by the Institute of Healthcare Management

Launch date: 2 April 2012

Key features include:

- flexibility to work at your own pace from work or home
- ability to stop and resume at any point from any computer
- reference guides
- colourful images throughout
- glossary of terms
- learning objectives
- quizzes
- certificate of achievement

What to do next

For more information, visit www.ncin.org.uk. You will be able to self register onto the learning space website ready for the launch on the 2nd April 2012

Who it is for and what you will learn

This new e-learning tool is aimed primarily at **Multi-disciplinary Team Co-ordinators** and **Cancer Registration staff** who need to know:



about cancer-medical terminology, diagnostic tests and treatments

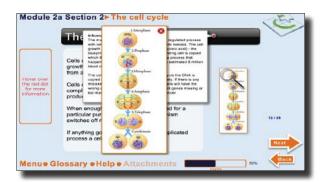


how cancer services are organised in the NHS



 about cancer types—key risks, including causes, risk factors, signs and symptoms, anatomy and physiology

Other NHS staff can also use it to improve their understanding of cancer

















NCIN website

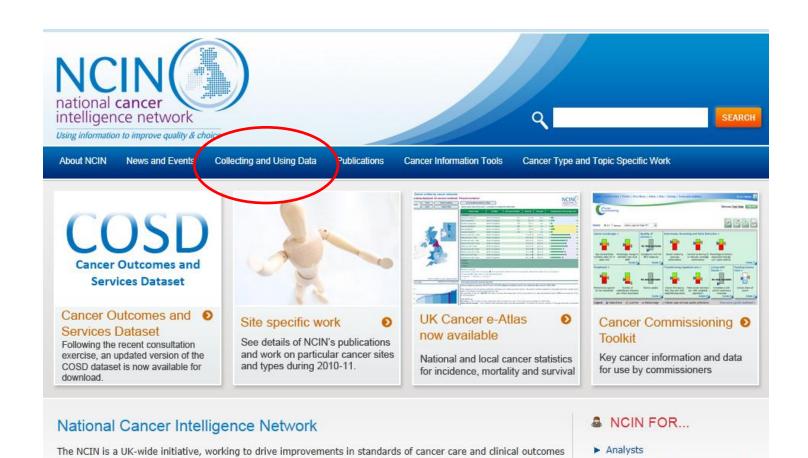
Find out more about NCIN.



Using information to improve quality & choice

► Commissioners and Policy Makers

▶ Health Professionals



by improving and using the information collected about cancer patients for analysis, publication and research.

Are you ready for COSD?



- This has been coming since January 2008!
- National contract
 - Guidance & Variation Documents
 - Conformance Guidance coming for 2013/14
- Conformance Reports and monitoring
- Are your MDT systems in place?
- Do your clinical teams know?



Thank you

trish.stokes@nhs.net

Mob: 07896 167971

cosd@ncin.org.uk