CancerStats II: Overview of available statistics for London

TCST-NCRAS Partnership
Last updated: 4th February 2019
From the CancerStats home page:

“The CancerStats portal has been designed to give providers of various types of cancer data rapid, quality feedback on the quality of their submissions. It allows users to look at the completeness of key data items and to conduct comparisons with local, regional and national averages to calculate relative performance. The portal will be a continued development, incorporating useful metrics and measures with the aim of improving the quality of data flowing to the National Cancer Registration and Analysis Service (NCRAS) and ultimately, informing improvements in patient care and outcomes.

The implementation of the CancerStats portal will be managed by the NCRAS directly with its data providers. The principal approach will be to work in partnership with clinicians and their information, management and multi-disciplinary teams.”
Introduction to Cancerstats II

- CancerStats II is the new website for CancerStats data. As well as presenting cancer metrics available on CancerStats I (e.g. incidence, mortality, survival) it will include a wider range of more bespoke reports.

- This is possible because NCRAS can create new reports without the need for developer input.

- **Note:** Currently pages may still be in development and new reports are added regularly. Reports under development are marked as such.

- CancerStats II is used as a portal for NCRAS to feedback to Trusts and other NHS organisations in as close to real time as possible.

- As with CancerStats I, users need to register for an account before being granted access.

- Users must adhere to information governance rules to protect patient identification if using CancerStats data involving small numbers.

- Available at: [https://cancerstats.ndrs.nhs.uk](https://cancerstats.ndrs.nhs.uk)
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COSD Reports

• **Level 1: Data Submissions**
  Indicator of whether submissions are made in required format and timelines

• **Level 2: Data Completeness**
  Completeness of key data items submitted by providers

• **Level 3: Data Summary**
  Allows user to create bespoke analysis of cancer metrics using selections/filters based on cancer registration records

• **Reports**
  Summary and stage reports

• **Site Specific COSD**
  Age analyses of haematological cancers/sarcomas

• **CTYA**
  Completeness of data items submitted on CTYA cancers

• **Pathology**
  Submitted pathology counts by Trust

• **Regional Completeness**
  Regional comparisons of Level 2 (completeness) data
Selections: year, dataset, geography

Outputs: timeliness of submissions, format of submissions, Trust summary
Level 2 Data Completeness: London 2018

Selections: date, tumour group, geography, data field

Outputs: summary analysis, data tables (National, Trust and tumour group), stage
Selections: year, sex, geography, tumour site, ICDO3, stage, performance status, treatment modality, age, ethnicity, deprivation

Outputs: incidence, stage, site, Morphology, performance status, age, treatment, ethnicity, deprivation, data table
02 Audits

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Audit reports available in CancerStats II

- **National Audit of Breast Cancer in Older Patients (NABCOP)**
  - Data Completeness (Cancer Alliance and Trust-level; 2014-2018)
  - Data Analysis (Trust-level; 2014-2016)
  - Quarterly Report of completeness (Cancer Alliance; 2014-2018)

- **National Lung Cancer Audit (NLCA)**
  - Data Submission timeliness and format (Trust-level; 2013-2019)
  - Data Completeness (London, Cancer Alliance and Trust; 2014-2018)
  - Data Analysis (Cancer Alliance and Trust-level; 2015-2016)
  - Quarterly Report of completeness (PDF)

- **National Prostate Cancer Audit (NPCA)**
  - Data Submission timeliness and format (Trust-level; 2013-2019)
  - Data Completeness (London, Cancer Alliance and Trust; 2014-2018)

- **Ovarian Cancer Audit**
  - In development (2018)

All audits utilise data routinely collected through COSD, but may also collect some additional data items.
Selections: year, invasive/non-invasive, geography, stage, grade, receptors, performance status, age group, screening category

Outputs: number, age, stage, invasive grade, DCIS grade, ER status, PR status, HER2 status, CNS, performance status, screening category, data table
Generated graphs can be downloaded as stand-alone images.
NLCA Data Analysis: Stage at diagnosis, London 2016

Selections: year, geography, basis of diagnosis, performance status, morphology, tumour site, treatment modality, age group

Outputs: stage, site, morphology, performance status, age, surgery, radiotherapy, chemotherapy, data table
NLCA Data Analysis: Treatment modality, London 2016

- Surgery: 4.2K, Yes 914 (21.7%), No 3,289 (78.3%)
- Radiotherapy: 4.2K, Yes 1,086 (25.8%), No 3,117 (74.2%)
- Chemotherapy: 4.2K, Yes 1,427 (34.0%), No 2,776 (66.0%)
### NPCA Data Submissions, London 2018

**Selections:** year, dataset, geography  
**Outputs:** timeliness of submissions, format of submissions, Trust summary

<table>
<thead>
<tr>
<th>Alliance</th>
<th>Kent And Medway</th>
<th>North Central And North East London</th>
<th>North West And South West London</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Dartford And Gravesham</td>
<td>Ealing Health Care Trust School</td>
<td>Chelsea And Westminster Hospital</td>
</tr>
<tr>
<td></td>
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<td>Great Ormond Street Hospital For Children</td>
<td>Croydon Health Services</td>
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<tr>
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<td>Maidstone And Tunbridge Wells</td>
<td>Homerton University Hospital</td>
<td>Epson And St Helier University Hospitals</td>
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<td>Medway</td>
<td>Moorfields Eye Hospital</td>
<td>Hillington Hospital</td>
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<tr>
<td></td>
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<td>Imperial College Healthcare</td>
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<td></td>
<td></td>
<td>Royal National Orthopaedic Hospital</td>
<td>London North West Healthcare</td>
</tr>
<tr>
<td></td>
<td></td>
<td>University College London Hospitals</td>
<td></td>
</tr>
</tbody>
</table>

**Guidance:**  
- 1.1 Timeliness of Submissions  
- 1.2 Format of Submissions  
- Trust Summary
Selections: date, geography, data fields
Outputs: Summary analysis, Data tables (National and Trust level)
03
Radiotherapy Dataset (RTDS)

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RTDS Reports

• **Data Submissions**
  Indicates whether Trusts have submitted RTDS data

• **Events (Attendances, Episodes and Prescriptions)**
  Number of radiotherapy treatment events measured as attendances, episodes and prescriptions

• **Radiotherapy machines (Attendances, working day profile)**
  Describes levels of radiotherapy machine use

• **Treatment codes**
  Attendances by HRG or OPCS treatment code

• **Intensity-Modulated Radiation Therapy**
  Describes levels of IMRT use
### Selections: year, geography

### Outputs: Summary

<table>
<thead>
<tr>
<th>Alliance</th>
<th>Trust Name</th>
<th>Month of Submission</th>
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<tr>
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<td>02/2018</td>
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<td>04/2018</td>
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<td>University College London Hospitals</td>
<td>06/2018</td>
</tr>
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<td>Imperial College Healthcare</td>
<td>07/2018</td>
</tr>
<tr>
<td>North West And South West London</td>
<td>Royal Marsden</td>
<td>08/2018</td>
</tr>
<tr>
<td>South East London</td>
<td>Guy's And St Thomas'</td>
<td>09/2018</td>
</tr>
<tr>
<td>Surrey And Sussex</td>
<td>Brighton And Sussex University Hospitals</td>
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<td>Royal Surrey County Hospital</td>
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</table>
RTDS Events (Attendances), London 2018

Selections: type of event, date, radiotherapy intent, geography, tumour site
Outputs: Summary, Trust breakdown, Alliance breakdown, CCG breakdown, Data table
Selections: machine type, treatment intent, tumour site, date, geography
Outputs: machine use by weekday, machine type, monthly attendances, working day profile
RTDS Treatment codes, London 2018

**Selections:** HRG/OPCS code, date, tumour site, geography

**Outputs:** monthly analysis treatment codes, treatment codes by Trust
Selections: date, tumour site, geography
Outputs: count of events by tumour site and month, proportion of events by Trust and month.
04
Systemic Anti-Cancer Therapy (SACT)

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SACT Reports

- **Total activity (SACT vs SUS)**
  Comparison of patient numbers in SACT to those in Secondary Uses Service dataset

- **Data submissions**
  Measures Trust performance against requirement to upload and map regimen names to nationally recognised name without errors

- **Data completeness (London & Trust-level; 2017-18)**
  Measures Trust performance against requirement for data completeness for certain data items

- **National Dose banding (London & Trust level)**
  Describes SACT drugs administered inside/outside national dose banding

- **CTYA Data Report (London & Trust-level; 2017-18)**
  Report on children, teenagers and young adults receiving systemic anti-cancer therapy
## SACT Data Submissions, London 2017-18

### Selections:
- date, geography

### Outputs:
- all treatment activity, regimens and queries, upload deadlines, Summary analysis

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### Trust performance against SACT data upload process requirements, by upload month

<table>
<thead>
<tr>
<th>Trust Name</th>
<th>Upload Month</th>
<th>Critical Errors %</th>
<th>Unmapped Regimen</th>
<th>Unresolved Queries</th>
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Data Completeness, London 2017

Selections: date, geography, age group, tumour group
Outputs: performance status and treatment intent, performance status completeness, perf. status and treatment intent by tumour group, height and weight, .......

These graphs show the completeness of performance status and treatment intent by tumour site. The target is 96%.
SACT National Dose Banding, London 2017

Selections: date, drug, geography, age group
Outputs: comparison drug inside/outside band, outside band, inside band, inside/outside band by Trust, .......

This shows which trusts are administering outside the dose band. It is best filtered to just one drug, and multiple trusts, or whole regions. The list box shows the selection of doses being used that are outside the dose band, and the number of administrations of those doses within the period.

Doses outside the dose band

Trust Name: Royal Marsden
Frequency: 29
Regimen Description: ECX
Children, teenagers and young adults receiving systemic anti-cancer Report, London 2017

Selections: date, age, geography, paediatric service, paediatric tumour, TYA service, TYA tumour

Outputs: Counts (patient/ tumour/ regimen), activity by organisation/age/weekday, paediatric tumours by age, TYA tumours by age, gender and age breakdown, regimen and drug summaries, regimen/drug by Trust, regimen/drug by gender

This chart displays the regimens submitted by trusts. The coloured bars beside the trusts names show the different regimens. To select a specific regimen, use the purple filter box on the right-hand side. Hover over the bars to see what regimens are included.
05

Life After Prostate Cancer Diagnosis (LAPCD)

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The LAPCD reports summarise over 100 questions in the LAPCD patient questionnaire alongside response rates.

Data are available at Trust, National and UK level.

**Report:** Gives results of all questions with categorised answers

**Survey Results:** Gives results of all scored questions
# LAPCD – Scored questions summary

**Selections:** questions where response is scored on a scale (e.g. from 0 - 5)

**Outputs:** Trust-level summary of score

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**Score for social distress**

<table>
<thead>
<tr>
<th>Nation</th>
<th>Trust new</th>
<th>Number that answered survey</th>
<th>Number that answered this question</th>
<th>Score mean</th>
<th>Score standard deviation</th>
<th>Score median</th>
<th>Score minimum</th>
<th>Score maximum</th>
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<td>153</td>
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</table>
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CADEAS cancer metrics on CancerStats II

- CADEAS aim to produce a series of reports on cancer metrics for Cancer Alliances
- These reports are intended to help Cancer Alliances identify variation and make evidence-based decisions for their cancer transformation programmes
- CCG and STP-level data is also provided for certain cancer metrics
- These reports are currently in the development and testing stages so may be updated frequently in the near future
• **Section 1: Summary Statistics**
  Summary data tables of cancer metrics presented in reports (Alliance, CCG)

• **Section 2: Operational Performance**
  Two week wait & 62-day wait: metadata, cross-sections and trends (Alliance, STP, CCG)

• **Section 3: Prevention**
  Obesity & smoking prevalence: metadata, cross-sections and trends (Alliance, STP, CCG)

• **Section 4: Screening**
  Screening uptake & coverage statistics: metadata, cross-sections and trends (Alliance, STP, CCG)

• **Section 5: Early diagnosis**
  Early stage diagnoses & emergency presentations: metadata, cross-sections and trends (Alliance, STP, CCG)

• **Section 6: Diagnostics**
  Diagnostic waiting times / inpatient procedures / emergency admissions: metadata, cross-section and trends (Alliance, STP, CCG)
CADEAS cancer metrics on CancerStats II

- **Section 7: Treatment**
  *In development*

- **Section 8: Outcomes**
  One year net survival / Under 75 mortality: metadata, cross-section (Alliance, STP & CCG) and trends (CCG)

- **Section 9: Living With and Beyond Cancer**
  *In development*

- **Section 10: Patient Experience**
  Results from CPES questionnaire (2016 & 2017): metadata, results (CCG)

- **Section 11: COSD Level 3**
  User-defined outputs using cancer registrations data (*Same as COSD level 3 data summary*)
### Section 1: Summary Statistics, London 2018

#### CancerStats

**Selections:** geography, cancer indicators  
**Outputs:** Alliance & CCG level performance

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#### Table: Summary Statistics, London 2018

<table>
<thead>
<tr>
<th>Indicator Category</th>
<th>Incidence</th>
<th>U5T Mort</th>
<th>E Pres</th>
<th>Early stage</th>
<th>Staged</th>
<th>62-day TMW</th>
<th>Pat. exp</th>
<th>One-year survival</th>
<th>Screening coverage (%)</th>
<th>Screening uptake (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Alliance</strong></td>
<td><strong>STP</strong></td>
<td><strong>CCG Name</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>North Central London</td>
<td>North Central London STP</td>
<td>North Central London CCG</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Barnet</td>
<td>574.9</td>
<td>117.1</td>
<td>17.6</td>
<td>53.1</td>
<td>81.5</td>
<td>76.5</td>
<td>92.2</td>
<td>8.6</td>
<td>74.2</td>
<td>48.3</td>
</tr>
<tr>
<td>Camden</td>
<td>562.8</td>
<td>103.1</td>
<td>13.7</td>
<td>47.9</td>
<td>77.6</td>
<td>78.1</td>
<td>91.1</td>
<td>8.5</td>
<td>76.4</td>
<td>49.9</td>
</tr>
<tr>
<td>Enfield</td>
<td>561.7</td>
<td>104.3</td>
<td>18.2</td>
<td>41.6</td>
<td>88.3</td>
<td>95.5</td>
<td>93.8</td>
<td>8.6</td>
<td>74.8</td>
<td>45.0</td>
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<tr>
<td>Havering</td>
<td>603.7</td>
<td>119.5</td>
<td>21.8</td>
<td>58.8</td>
<td>82.2</td>
<td>70.3</td>
<td>89.9</td>
<td>8.5</td>
<td>73.3</td>
<td>45.9</td>
</tr>
<tr>
<td>Haringey</td>
<td>587.8</td>
<td>129.4</td>
<td>20.9</td>
<td>53.2</td>
<td>84.3</td>
<td>82.1</td>
<td>91.1</td>
<td>8.5</td>
<td>71.1</td>
<td>47.5</td>
</tr>
<tr>
<td>West London</td>
<td>636.9</td>
<td>146.1</td>
<td>11.5</td>
<td>55.7</td>
<td>84.8</td>
<td>93.8</td>
<td>93.3</td>
<td>8.6</td>
<td>73.0</td>
<td>47.3</td>
</tr>
<tr>
<td>NW &amp; SW London</td>
<td>NW &amp; SW London STP</td>
<td>NW &amp; SW London CCG</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brent</td>
<td>507.1</td>
<td>117.9</td>
<td>17.8</td>
<td>44.8</td>
<td>72.5</td>
<td>90.6</td>
<td>93.0</td>
<td>8.6</td>
<td>74.1</td>
<td>44.1</td>
</tr>
</tbody>
</table>

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**Legend:**
- **Alliance & CCG Grid:**
- **Selection multiple:**
- **Outputs:** Alliance & CCG level performance
Section 2: 62 Day Wait Trends, London 2018

Selections: years, geography
Outputs: TWW, 62 day wait (cross-section & trends)
Selections: prevention metric, geography, year
Outputs: obesity prevalence, smoking prevalence (cross-section & trends)
Section 4: Bowel Screening coverage trends, London 2010-2018

Selections: screening programme metric, geography
Outputs: screening metric (cross-section & trends)

Screening metric over time, by Cancer Alliance

(Chart showing trends in bowel screening coverage from 2010 to 2018, with data points for different regions.)
Section 5: Early diagnosis trends, London 2011-2017

Selections: dates, geography
Outputs: early stage diagnosis percentage (cross-section & trends)

Selections: dates, geography
Outputs: rate of emergency admissions (cross-section & trends)
Section 8: Under 75 mortality distribution 2016, SE London compared to England (2016)

Selections: geography, year
Outputs: mortality distribution, mortality rates (cross-section & trends)

Select Cancer Alliance:
South East London

Select year:

U75 age-standardised cancer mortality rate per 100,000: 20 most commonly diagnosed cancers

Select England, Cancer Alliance, STP or CCG for comparison:
ENGLAND

U75 age-standardised cancer mortality rate per 100,000: 20 most commonly diagnosed cancers

- Select a geography from the top selection box - from a choice of England overall, Cancer Alliance, STP or CCG.
- You can then compare the Under 75 cancer mortality distribution with another geography of your choice.
- Age-standardisation has been applied, meaning that you are not based on age. Other population and patient characteristics have not been controlled for.
## The National Cancer Patient Experience Survey (CPES) results

<table>
<thead>
<tr>
<th>Question number</th>
<th>Question text</th>
<th>RAG</th>
<th>Value</th>
<th>RAG VS expected range</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Before you were told you needed to go to hospital about cancer, how many times did you see your GP (family doctor) about the health problem caused by cancer?</td>
<td>within</td>
<td>80.0</td>
<td>2</td>
</tr>
<tr>
<td>2</td>
<td>How do you feel about the length of time you had to wait before your first appointment with a hospital doctor?</td>
<td>within</td>
<td>80.0</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Beforehand, did you have all the information you needed about your test?</td>
<td>within</td>
<td>84.0</td>
<td>2</td>
</tr>
<tr>
<td>4</td>
<td>Overall, how did you feel about the length of time you had to wait for your test to be done?</td>
<td>within</td>
<td>80.0</td>
<td>2</td>
</tr>
<tr>
<td>5</td>
<td>Were the results of the test explained in a way you could understand?</td>
<td>within</td>
<td>80.0</td>
<td>2</td>
</tr>
<tr>
<td>6</td>
<td>When you were first told that you had cancer, had you been told you could bring a family member or friend with you?</td>
<td>within</td>
<td>71.0</td>
<td>2</td>
</tr>
<tr>
<td>7</td>
<td>How do you feel about the way you were told you had cancer?</td>
<td>within</td>
<td>84.0</td>
<td>2</td>
</tr>
<tr>
<td>8</td>
<td>Did you understand the explanation of what was wrong with you?</td>
<td>within</td>
<td>76.0</td>
<td>2</td>
</tr>
<tr>
<td>9</td>
<td>When you were told you had cancer, were you given written information about the type of cancer you had?</td>
<td>within</td>
<td>72.0</td>
<td>2</td>
</tr>
<tr>
<td>10</td>
<td>Before your cancer treatment started, were your treatment options explained to you?</td>
<td>within</td>
<td>80.0</td>
<td>2</td>
</tr>
<tr>
<td>11</td>
<td>Were the possible side effects of treatment(s) explained in a way you could understand?</td>
<td>within</td>
<td>74.0</td>
<td>2</td>
</tr>
<tr>
<td>12</td>
<td>Were you offered practical advice and support in dealing with the side effects of your treatment?</td>
<td>within</td>
<td>88.0</td>
<td>2</td>
</tr>
<tr>
<td>13</td>
<td>Before you started your treatment(s), were you also told about any side effects of the treatment that could affect you in the future rather than straight away?</td>
<td>within</td>
<td>58.0</td>
<td>2</td>
</tr>
<tr>
<td>14</td>
<td>Were you involved as much as you wanted to be in decisions about your care and treatment?</td>
<td>within</td>
<td>76.0</td>
<td>2</td>
</tr>
<tr>
<td>15</td>
<td>Were you given the name of a Clinical Nurse Specialist who would support you through your treatment?</td>
<td>within</td>
<td>85.0</td>
<td>2</td>
</tr>
<tr>
<td>16</td>
<td>How easy or difficult it been for you to contact your Clinical Nurse Specialist?</td>
<td>worse</td>
<td>75.0</td>
<td>3</td>
</tr>
<tr>
<td>17</td>
<td>Were you happy to be in contact with your Clinical Nurse Specialist?</td>
<td>worse</td>
<td>73.0</td>
<td>3</td>
</tr>
</tbody>
</table>
Planned releases
Upcoming Data Releases on CancerStats II

• **Cancer incidence crude and age-standardised rates:**
  Will be available to coincide with 2017 cancer registrations update

• **Cancer mortality crude and age-standardised rates:**
  Will be available to coincide with 2017 cancer registrations update

• **Treatment modality**

• **Stage at diagnosis**