

# Delaware Cancer Registry Execution Plan 2018-2021

## Delaware Cancer Registry Advisory Committee (DCRAC)

### BACKGROUND

The Delaware Cancer Registry Execution Plan was created in 2006 with the input and guidance of the Delaware Cancer Registry Advisory Committee (DCRAC). The DCRAC was first established in 2005. The DCRAC membership includes oncologists, certified tumor registrars, healthcare planners and policy makers, and representatives of advocacy organizations. The revised priorities, action items and accountabilities for 2018-2021 are shown in the table on the following pages.

The DCRAC provides guidance and support to the Delaware Cancer Registry toward the goal of improving cancer registry operations, including timeliness, completeness and quality of cancer data collection, and on the best use of cancer registry data for cancer surveillance and control initiatives, program planning, and cancer research. This plan reflects a revised version of the plan formulated in 2015. The committee reviewed the prior 3-year plan, and incorporated agreed upon changes into this document.

### MISSION AND PURPOSE

The mission of the Delaware Cancer Registry is to help reduce the cancer burden in Delaware, by maintaining a cancer database of excellent quality and completeness, and making this information available to health professionals, researchers, health care organizations and public health professionals for cancer prevention and control efforts.

The purpose of the Delaware Cancer Registry is to collect timely, complete and accurate data from reporting sources to insure an accurate and continuing source of data concerning cancer and certain specified benign tumors. Reporting sources include all health care practitioners who diagnose or treat cancer, as well as hospitals, clinical laboratories, and other cancer diagnosis and treatment facilities within Delaware. The Registry will serve as a source of information to measure quality of cancer care in Delaware.

### DCR GOALS FOR 2018-2021 (Action steps are detailed in the accompanying Execution Plan)

1. Improve timeliness/completeness of reporting of cancer case data, through technological improvements and by increasing reporting by non-hospital sources.
2. Improve data quality, including staging and treatment data. Enable the routine evaluation of treatment practices and patterns against patient outcomes.
3. Increase the use of data to answer research questions.
4. Develop routes of efficient and effective communication between the Registry and its stakeholders, especially with healthcare practitioners and facilities, interested agencies and organizations, and the public. Better, clearer communication of reporting requirements. Improve communication of the benefits of the DCR to the public.
5. Maintain NPCR funding

## Delaware Cancer Registry Execution Plan 2018-2021

Strategy/Objective	Responsible Party	Measure	Current	Goal	Last Updated	Indicator *
<b>STRATEGY 1: Improve timeliness/completeness of reporting of cancer case data, through technological improvements &amp; by increasing reporting by non-hospital sources.</b>	DCR, DCRAC	NAACCR Certification-Annual	Gold	Gold	June 2018	
		NPCR Annual Submission Reports-Advanced Data Quality Standard for 12-month Data	Standards Met	Standards Met	June 2018	
<b>Objective 1A:</b> Increase electronic data submissions from reporting sources.	DCR	Physician Offices – % of facilities electronic --2 offices exempt from electronic reporting (retiring)	87% (13/15)	80%	December 2018	
		Ambulatory Surgery Centers & Path labs- % of facilities electronic --4 path labs reporting on paper (not yet reporting through PHINMS)	82% (23/28)	80%	December 2018	
		Hospitals- % of facilities electronic	100%	100%	December 2018	
<b>STRATEGY 2: Improve data quality. Enable the routine evaluation of treatment practices and patterns against patient outcomes.</b>	DCR, DCRAC	Quality audits of DCR and hospital data - 2016: NPCR Data Quality Evaluation 2017: DCR Hospital Data Quality Evaluation	2017-1 audit completed	1 audit per year	June 2018	
<b>Objective 2A:</b> Move to improving quality of data using the Rapid Quality Reporting System (RQRS) of the Commission on Cancer, and the Quality Oncology Practice Initiative (QOPI) for all hospitals in the state with subsequent public reporting.	DCR	Engage Delaware hospitals in posting Commission on Cancer standard of care quality reports for public review (i.e., CP3R reports) (Optional)	0	6	December 2017	
		Aggregate CP3R report posted on website	Pending	Report posted	December 2018	

\*Indicator colors: **Green**-On Track; **Yellow**-Progress/slow; **Red**-Not started

<b>Objective 2B:</b> Monitor completeness of DCR's first course of treatment data.	DCR	Annual NPCR submission data quality reports - Completeness of treatment data (% blank or unknown values) compared to NPCR median	2015 Data Report: % blank or unknown values less than the NPCR median for all treatment data fields	% blank or unknown values less than the NPCR median value for all treatment data fields	April 2018	Green
<b>Objective 2C:</b> All Payer Claims Database	DCRAC	APCD established	DCHI Committee formed	APCD operational	June 2018	Yellow
<b>Objective 2D:</b> Track DCR's progress on meeting NPCR standards	DCRAC	Review of DCR's Interim Progress Reports (IPRs) at DCRAC meetings	Reviewed March 2016	Annual Review	December 2017	Yellow
<b>STRATEGY 3: Increase use of data to answer research questions.</b>	DCR, DCRAC	Annual # of research projects using DCR data: Baseline-4 in 2011	<b>26 in 2018;</b> 47 in 2017; 15 in 2016;	Increased # of research projects	September 2018	Green
<b>Objective 3A:</b> Provide help to data users (e.g. FAQ on webpage, update website)	DPH	# of hits on data access guidelines/WebTrends traffic analysis- Baseline: 486 hits in 2012; 736 in 2016	<b>211 in 2018 so far;</b> 557 in 2017	Increased # of hits	June 2018	Yellow
<b>Objective 3B:</b> Publicize availability of data for this purpose to inform researchers, academic institutions, & other stakeholders, e.g. through DE Medical Society publications, hospital meetings.	DCR	# of articles, events, reports publicizing availability of data, including emails linkingmag to DCR webpage	1 in 2018 so far; 5 in 2017: 3 DJPH articles; 1 DMJ article; 1 email to physicians	3 per year	September 2018	Green

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<b>STRATEGY 4: Develop routes of efficient communication between the registry &amp; its stakeholders: especially with healthcare practitioners &amp; facilities, agencies, &amp; the public. Better communication of reporting requirements, &amp; of the benefits of the DCR to the public.</b>	DCR, DCRAC	# of professional articles/publications about DCR per year	<b>1 in 2018 so far;</b> 6 in 2017 – 3 DJPH articles; 3 DMJ articles	1 per year	September 2018	Green
		# of overall hits on DCR website- Baseline: 2083 hits in 2010	<b>1720 in 2018 so far;</b> 3078 in 2016; 2916 in 2017	Increased # of hits	June 2018	Yellow
Objective 4A: Make public NAACCR & NPCR findings regarding certification/quality of DCR data, e.g. post on DCR website, DPH press release.	DCR	Update NAACCR and NPCR submission results on website once/year	Updated in 2017	Annual update	December 2017	Green
<b>STRATEGY 5: Maintain NPCR Funding</b>	DCR					Light Blue
<b>Objective 5A:</b> Ensure use of cancer registry data for public health & surveillance research purposes in at least 5 of the following ways:  1) Comprehensive cancer control 2) Detailed incidence and mortality by stage and geographic area; 3) Collaboration with cancer screening programs for breast, colorectal, cervical cancer; 4) Health event investigation; 5) Needs assessment/program planning (e.g., Community Cancer Profiles); 6) Program evaluation; 7) Epidemiologic studies	DCR	Cancer registry data used in at least 5 ways per NPCR Program Standards	In progress	Five/Year	September 2018	Green

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<b>Objective 5B:</b> Implement transition from Collaborative Staging to directly coded AJCC and SEER Summary Stage	DCR	Percentage of cases including directly coded staging- 2016 and 2017 Diagnosis Year Cases: AJCC Clinical Stage Group: 100% coded; and SEER Summary Stage 2000: 100% coded	Complete: 100% for AJCC Clinical Stage Group, 100% for SS 2000	100%	December 2018	
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*We acknowledge the Centers for Disease Control and Prevention for its support of the Delaware Cancer Registry under cooperative agreement DP17-1701*

**Strategy Three: Research Projects Using DCR Data, 2018 (N=26)**

Date	Subject of Study	Data Provided by the DCR	Requested By
1/10/2018	Delaware breast cancer data, latest release, for use in preparing for breast cancer awareness activities	DE DPH Cancer Control webpage, Incidence and Mortality report, 2009-2013	DE DPH
1/11/2018	Sussex county resident lung cancer cases by SEER stage, 2015 and 2016	Crosstab of Sussex lung cancer cases by diagnosis year and SEER Stage	Community Advocacy Organization- Healthier Sussex
1/11/2018	2003 - 2007 DE incidence file for I&M report	2003 - 2007 DE incidence file for I&M report	DE DPH
1/17/2018	Delaware 2016 analytic prostate cases by county and stage	Delaware 2016 analytic prostate cases by county and stage	CCHS Oncology Data Center
2/19/2018	Top five cancer site rankings in Delaware- DCR webpage	Referred to the NPCR website, State Cancer Facts section	CCHS Oncology Data Center
3/6/2018	Recent lung cancer incidence and mortality statistics, Delaware, Sussex Co	Referred her to the Cancer Program website, Incidence and Mortality Report 2009-2013, pages on lung cancer statistics by county	DE DPH

Date	Subject of Study	Data Provided by the DCR	Requested By
3/9/2018	Delaware incidence cases 2009-2013	Cases diagnosed 2009-2013, patient address at diagnosis, primary site, Census Tract 2010, age, histology and sex	DE DPH
5/8/2018	International comparison of cancer survival: Comparing high-income Americans to average residents of other developed nations	Cancer in North America (CiNA) Deluxe Variable Set 1995-2015 w/ county-level data	University of Pennsylvania
5/8/2018	Circadian Disruption and Cancer Incidence in the US	Cancer in North America (CiNA) Deluxe Variable Set 1995-2015 w/ county-level data	National Cancer Institute
5/14/2018	Breast cancer in U.S. women ages 20-39	CiNA Deluxe standard dataset	American Cancer Society
6/25/2018	Delaware HPV-Associated Cancer cases	Delaware HPV-Associated Cancer cases, 2010-2014	DE DEPH
7/31/2018	DTI Open Data Portal - updated statistics for 2010-2014 Incidence and Mortality		DE DEPH
8/1/2018	Christiana Care patients- Follow-up data	Christiana Care patents with a date of death between 1/1/2017-12/31/2017	CCHS Oncology Data Center
8/1/2018	CCHS Frequency report on primary payer for analytic cases dx in 2016 (for NCORP funding application)	Primary payer frequency report	CCHS Oncology Data Center
8/17/2018	Linkage with the Delaware Cancer Treatment Program: DCTP and insurance outcomes	Frequencies; further data pending	Christiana Care- Dr. Danier Moore
9/13/2018	Localized breast and colon estimations for budget narrative	% of colorectal and breast cancers detected at local stage (actual FY 2018 and estimate for 2020)	DE DPH
9/17/2018	Cervical study for CoC standard - # of cervical cancer cases by various variables	Frequencies by age, stage, place of dx	Bayhealth Medical Center
9/21/2018	Localized lung estimations for budget narrative	% of lung cancers detected at local stage (actual FY 2018 and estimate for 2020)	DE DPH
9/27/2018	Screening for life linkage - breast cancer cases	DCR data for 5 requested SFL cases	DE DPH
10/9/2018	Concerned citizen - high cancer rates in Millford and Millsboro in Sussex County, DE; DHSS requesting cancer statistics and write-up for legislators	Age-adjusted 5-year incidence rates (all cancer) for census tracts within Millford and Millsboro	DE DPH
10/23/2018	Frequency report for CCHS	Frequency report by chemotherapy code for triple breast cancer cases (CS SSF 16=000) stage 1-4 seen 2013-2017, all facilities	Christiana Care
11/9/2018	Survival report for breast cases 2010-2014 by best AJCC stage	Survival report (from RMCDS) for all analytic breast cancer cases 2010-2014 using best AJCC stage	Beebe Healthcare
11/9/2018	Age report for breast, lung, prostate, colon, and melanoma 2017 cases	Frequency of 2017 analytic breast, lung, prostate, colon, and melanoma cases by age (5 yr increments)	Beebe Healthcare

Date	Subject of Study	Data Provided by the DCR	Requested By
11/13/2018	Reports for 2017 lung cases by best AJCC stage and 5 year survival 2010-2014 lung cases by Best AJCC Stage	Frequency of 2017 lung cases by best AJCC Stage; survival report for 2010-2014 lung cases by best AJCC Stage	Beebe Healthcare
11/14/2018	Reports for 2017 Top 5 Sites (breast, lung, prostate, colon, melanoma) by best AJCC stage	Frequencies for top 5 sites by best AJCC stage	DE Beebe Healthcare
12/20/2018	Case listing for research catchment area for Abramson Cancer Center at Upenn	Pending HSRB review	Abramson Cancer Center at UPenn