### National Cancer Audit Collaborating Centre

UPCARE: Programme name - please do not change this

National Cancer Audit Collaborating Centre

Workstream name (if applicable) - please do not change this field.\*

National Bowel Cancer Audit (NBoCA)

Contract status Ongoing

field.\*

Audit or non-audit Audit

**HQIP commissioned\*** Yes

**HQIP AD** CR

**HQIP PM** SW

1.0 Included in current NHS Yes

Quality Accounts\*

- HQIP agreement\*

1.1a Geographical coverage

England; Wales

1.2a Topic - please select which ONE of the following best describes the topic area for the programme or workstream. If more than one apply, please select 'Other' and add comment to the next question.\* Cancer

1.3a Healthcare setting\*

NHS secondary or tertiary care

1.4 Inclusion and exclusion criteria\*

The bowel cancer audit stream includes all first diagnoses of primary bowel cancer within the current reporting period. Included patients must be:

- · Aged 18 or older at the date of diagnosis
- Diagnosed in the audit period (April-March)
- Diagnosed with colorectal cancer, with one of the following ICD10 codes:
- C18 Malignant neoplasm of colon
- C19 Malignant neoplasm of rectosigmoid junction
- · C20 Malignant neoplasm of rectum

The following are excluded: Sarcomas, B cell lymphoma, Neuroendocrine / Carcinoid tumours, melanoma, patients diagnosed via death certificate only.

# 1.5 Methods of data submission\*

Extraction from existing data source(s)

1.6a 2023/24 data submission closes - please indicate date, series of dates or frequency.\*

1.6b 2024/25 data

submission closes - please indicate date, series of dates or frequency.\* n/a

n/a

1.8 Data quality & analysis plan

Data validation rules are implemented by NDRS in the curation of the rapid and gold standard cancer registration databases and cleaning is carried out by analysts.

Data quality measures (data completeness of key data items) are reported at trust level alongside performance indicators.

The risk-adjustment models for postoperative mortality have been developed using appropriate statistical methods.

Analyses in the report are carried out by experienced statisticians / epidemiologists with supervision from senior statisticians.

#### 1.9 Outlier policy

www.nboca.org.uk/resources/nboca-outlier-policy/

#### 2.1 Outcome measures

BC0003 Adjusted 90-day mortality after major resection

BC0004 Adjusted 30-day unplanned return to theatre after major resection

BC0005 Adjusted 30-day unplanned readmission after major resection

BC0006 Adjusted 18-month unclosed ileostomy after anterior resection

BC0008 Severe acute toxicity after adjuvant chemotherapy for colon cancer

BC0010 Adjusted 2-year mortality rate after major resection.

### 2.2 Process measures

BC0001 Seen by Clinical Nurse Specialist

BC0007 Stage III colon cancer receiving adjuvant chemotherapy

BC0009 Rectal cancer patients receiving neo-adjuvant therapy

## 2.3 Organisational

measures

BC0002 Trust/MDT volume for rectal cancer surgery

# 2.4 Patient reported outcome measures

n/a

2.5 Patient reported experience measures

n/a

2.6a Do measures align with any of the following sources of evidence (select all that apply) NICE clinical guideline; Professional society; Other (please describe in next question)

2.6b Evidence supplemental information

National Institute for Health and Care Excellence. Clinical guideline [NG151] (2020)

ACPGBI: Guidelines for the Management of Cancer of the Colon, Rectum and Anus (2017) – Surgical Management

Boyle JM, et al. Measuring variation in the quality of systemic anti-cancer therapy delivery across hospitals: A national population-based evaluation. Eur J Cancer. 2023 Jan;178:191-204.

The delivery of adjuvant chemotherapy is a complex process which includes appropriate patient selection and optimisation, tailoring treatment doses, and the monitoring and management of toxicities. NBOCA have developed and evaluated the use of a national performance indicator to assess hospital variation in severe acute toxicity rates in order to stimulate and support quality improvement.

Shulman LN, et al. Survival As a Quality Metric of Cancer Care: Use of the National Cancer Data Base to Assess Hospital Performance. J Oncol Pract. 2018 Jan;14(1):e59-e72.

2-year all-cause mortality rate after major resection is an important quality metric of cancer care.

3.1 Results visualisation

Annual report; Patient report; Static data files; Other

3.2a Levels of reporting\*

National; Trust or health board; Hospital or specialist unit; Cancer alliance

3.3 Timeliness of results feedback

Within 2 years

3.4 Link to dynamic reporting\*

http://www.nboca.org.uk/trust-results

2023/24 Dataset covers the period FROM/TO (within financial year 01/04 to 31/03)\*

01/04/2021 - 31/03/2022

2024/25 Dataset covers the period FROM/TO (within financial year 01/04 to 31/03)\*

01/04/2022 - 31/03/2023

Dataset #1 name

**Clinical Dataset** 

Dataset #1 type\*

Clinical audit

Dataset #1 population coverage\*

All eligible patients

Dataset #1 items collected 0

(n)

Dataset #1 use of existing national datasets

**Dataset #1 specification** 

Dataset #3 name

Hospital episode statistics (HES); Cancer outcomes and services dataset (COSD); Office for National Statistics (ONS); Radiotherapy dataset (RTDS); Systemic anticancer treatment (SACT); Patient episode database for Wales (PEDW); Cancer patient experience survey (CPES); Cancer waiting times (CWT); Diagnostic imaging dataset (DID); Emergency care dataset (ECDS); Other: Cancer petwork information system Cymru (CaNISC)

https://www.nboca.org.uk/resources/nboca-key-cosd-data-items-2023-2024/

Other; Cancer network information system Cymru (CaNISC)

Dataset #4 name Not applicable

Not applicable

21/09/2021

When was your Healthcare Improvement Plan

(sometimes referred to as a Quality Improvement Plan) last reviewed? Please upload under 'Files' below using naming convention ('yyyymmdd\_PROGRAMME-

Workstream-Hlplan').

National report publication date (within calendar year

01/01 - 31/12/2023)\*

Published/planned national report publication date

(within calendar year 01/01 -

31/12/2024)\*

08/02/2024

n/a

Planned national report publication date (within

calendar year 01/01 -

31/12/2025)\*

09/01/2025

Please add the most recent date that you have reviewed and updated an online

version of UPCARE
Workstream section(s) on
your project's website (click

into the response to see pop-up guidance).

08/03/2024

Please add a hyperlink to UPCARE Workstream section(s) on your website (click into the response to see pop-up guidance).\* https://www.nboca.org.uk/resources/understanding-practice-in-clinical-audit-and-registries-upcare-tool/

Files 20210921\_NBOCA-Hlplan.pdf