

Commission on Cancer, National Cancer Database: Overcoming Challenges and Leveraging Opportunities through an Enhanced Infrastructure

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Nothing to Disclose

NCDB Infrastructure Enhancement

Expedited **reporting** of patient quality improvement

Rapid Cancer Reporting System

Quality Measure Compliance	Updated 24-hours
Completeness Report	Updated Weekly
Benchmark reports	Updated Annually



Monthly Submission
Requirement



Monthly in 2025



NCDB pathway towards concurrent abstraction

Commission on Cancer Standard 6.4,
all newly diagnosed cancers are
reported to RCRS monthly



First Course
Treatment

Diagnosis

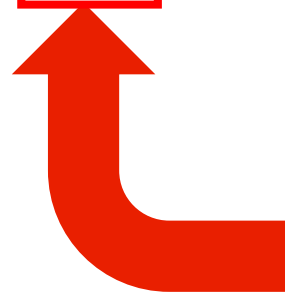
Follow-Up

Staging

Interactive Data Quality Reports

Improve accuracy of reported data through interactive reports

NAACCR #	Code Evaluated	Benchmark (highlighted if % above this value)	Hospital Percent	Number (Num/ Denom)	Message
1270	blank day	5%	5.13%	71732 / 1397425	Full date of first treatment or decision not to treat not consistently recorded
1285	9	1%	0.4%	5527 / 1397425	High portion of cases with unknown treatment status
700	86, 88, 99	8%	6.11%	24336 / 398263	High unknown for chemotherapy given at this facility (allows that some 88s may not be given yet)



feedback to CoC-accredited facilities about on missingness of data for NCDB-required data items

Reporting Patient Quality of Care in Real-Time

The Rapid Cancer Reporting System of the National Cancer Database

- Consists of patient case data collected by hospital cancer registries
- Data are transmitted using nationally standardized specifications established by the North American Association of Central Cancer Registries (NAACCR)
- No additional capital investment is necessary to participate in RCRS above CoC accreditation

Perspectives on Real-Time Reports

Rapid Cancer Reporting System (RCRS)

Performance Rates



Collapse/Expand

Clear Selection

Run Date/Time: 03/20/2024 09:07:50 AM CDT

Report Description

Summary Panel

Summary View: Table

Measure Group: All Measure Groups

Disease Site:

☒ (All)

☒ Breast

☒ Colon

☒ Gastric

☒ HeadNeck

☒ Lung

☒ Melanoma

☒ Rectum

Quality Measures

Primary Site	Measure	Measure Description	Label	Rolling Year EPR	2023 Estimated Performance Rate
Breast	BCSdx	For patients with AJCC Clinical Stage I-III breast cancer, the first therapeutic surgery in a non-neoadjuvant setting is performed within and including 60 days of diagnosis	PR/EPR 95% CI Benchmark	71.64%	70.80% [63.19% - 78.42%] 0%
	BCSRT	For patients undergoing breast-conserving surgery without adjuvant chemo or immunotherapy for clinical stage I-III breast cancer, radiation therapy, when administered, is initiated <= 60 days of definitive surgery	PR/EPR 95% CI Benchmark	72.00%	76.54% [67.32% - 85.77%] 0%
	MAC	Combination chemotherapy or chemo-immunotherapy (if HER2 positive) is recommended or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC T1cN0M0, or stage IB - III hormone receptor negative breast cancer	PR/EPR 95% CI Benchmark	100.00%	100.00% [100.00% - 100.00%] 0%
Colon	ACT	For patients under the age of 80 with surgically-managed pathologic stage III colon cancer (N>0), adjuvant chemotherapy is initiated within 4 months (120 days) of diagnosis, or recommended	PR/EPR 95% CI Benchmark	82.76%	77.27% [59.76% - 94.78%] 0%
	C12RLN	For patients undergoing a colon resection for colon cancer, at least 12 regional lymph nodes are removed and pathologically examined at time of resection	PR/EPR 95% CI Benchmark	95.38%	96.15% [91.89% - 100.00%] 0%
Gastric	G16RLN	For surgically managed gastric adenocarcinoma cancer patients, at least 16 regional lymph nodes are removed and pathologically examined during resection for curative intent therapy	PR/EPR 95% CI Benchmark	Data Not Available	* Data Not Available
	GCTRT	For surgically managed patients age 18-79 with gastroesophageal junction or esophageal cancer cT2 with poor differentiation, or	PR/EPR 95% CI	Data Not Available	100.00% [100.00% - 100.00%] 0%