

NPCA, Clinical Effectiveness Unit

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NPCA Newsletter, Summer 2017

Annual Report 2017

The NPCA team has started the production of this year's Annual Report (2017). It will be published on **22nd November**.

The National Cancer Registration Service, the NPCA's data partner, has provided us with the **final dataset** that we are going to use for this Annual Report. It includes all registered patients diagnosed with prostate cancer between 1 April 2015 and 31 March 2016 in England.

Thank you to all members of Trust teams who collected and submitted data!

We sent you a **data summary** with the number of patients allocated to the Trust where the patients were diagnosed. The table also includes the completeness of the data items describing key patient and tumour characteristics.

The dataset set **can no longer be changed**, but we really need your **feedback**. It will help us to interpret the results of our analyses so that we can add an explanation in the Annual Report if a performance indicator for a provider unit differs from what we see in other provider units.

Please check the data that we have for your Trust. If you think the number of men allocated to your Trust at diagnosis is incorrect please inform the NPCA team via email <u>npca@rcseng.ac.uk</u> by Friday 7th July . Also, please let us know if the completeness of data items in your Trust is lower than expected.

NPCA Performance Indicators

In the Annual Report 2017, the following four indicators will be reported for each **Specialist Multidisciplinary Team** (related to the Trust where a patient was diagnosed):

- The proportion of men diagnosed with advanced disease
- The proportion of men diagnosed with locally advanced disease
- The proportion of men with low-risk localised prostate cancer undergoing radical prostate cancer therapy
- The proportion of men with locally advanced disease receiving radical prostate cancer therapy

The following three indicators will be reported for each **Trust that carries out radical prostate cancer surgery:**

- Length of hospital stay after radical prostatectomy
- The proportion of patients who had an emergency readmission within 90 days of radical prostatectomy
- The proportion of men experiencing a severe urinary complication requiring an intervention following radical prostatectomy

The following two indicators will be reported for each **Trust that provides radiotherapy**:

- The proportion of men experiencing a severe bowel complication requiring an intervention following external beam radiotherapy
- The proportion of men with locally advanced disease with risk of pelvic node involvement receiving pelvic radiotherapy

Detection and Management of Outliers

The NPCA team has started the production of this year's Annual Report (2017). We will contact your unit in August 2017 if a **performance indicator** for your unit is **not within an acceptable range**. We will follow as much as possible the recently <u>updated Department of Health guidance on the detection</u> <u>and management of 'outlier'.</u>

Allocating a patient to a Trust of diagnosis

The NPCA team has received important feedback from a Trust about a **difference** in the **number of patients** diagnosed with prostate cancer in their Trust as **reported in last year's Annual Report** (2016) and the number that was **recorded by the Trust** itself.

In response, we have worked with the NCRAS to **improve the approach to allocate patients to the Trust** where their prostate cancer was diagnosed. The results of this work have been summarised in a <u>(lessons learnt document</u>).

We also publish **an** <u>Updated Erratum</u> **in June 2017** presenting updated tables from the 2016 Annual Report using this new approach, which replaces the erratum that was published in February 2017.

NPCA presentations at conferences	Date
European Association of Urology	25—27 March 2017, London
Public Health England Cancer Outcomes and Services Conference	13—14 June 2017, Manchester
British Association of Urological Surgeons	26—28 June 2017, Glasgow