



## National Cancer Audit Collaborating Centre

<b>Understanding Practice in Clinical Audit and Registries (UPCARE): Programme name</b>	National Cancer Audit Collaborating Centre
<b>Workstream name (if applicable)</b>	National Prostate Cancer Audit (NPCA)
<b>Contract status</b>	Ongoing
<b>Audit or non-audit</b>	Audit
<b>HQIP commissioned</b>	Yes
<b>HQIP AD</b>	CR
<b>HQIP PM</b>	SW
<b>Included in current NHS Quality Accounts</b>	Yes
<b>1.10 Geographical coverage - HQIP agreement</b>	England; Wales
<b>1.3 Healthcare setting</b>	NHS secondary care
<b>1.4 Inclusion and exclusion criteria</b>	<a href="#">NPCA Annual Report 2021: Methodology Supplement and Data Comparison Report - National Prostate Cancer Audit</a>
<b>1.5 Methods of data submission</b>	Linkage to existing data sources
<b>1.7 Data flow diagram</b>	<a href="#">NPCA Dataflow 2021 - National Prostate Cancer Audit</a>
<b>1.8 Data quality &amp; analysis plan</b>	<a href="#">NPCA-Annual-Report-2022_Methodology-Supplement_12.01.23.pdf</a>
<b>1.9 Outlier policy</b>	<a href="#">NPCA Outlier Policy 2020 - National Prostate Cancer Audit</a>
<b>2.1 Outcome measures</b>	<a href="#">NPCA-Annual-Report-2022_Methodology-Supplement_12.01.23.pdf</a>
<b>2.2 Process measures</b>	<a href="#">NPCA-Annual-Report-2022_Methodology-Supplement_12.01.23.pdf</a>
<b>2.3 Organisational measures</b>	<a href="#">NPCA Organisational Audit 2021 - National Prostate Cancer Audit</a>

<b>2.4 Patient reported outcome measures</b>	<a href="#">NPCA Annual Report 2020: Methodology Supplement - National Prostate Cancer Audit</a>
<b>2.5 Patient reported experience measures</b>	<a href="#">NPCA Annual Report 2020: Methodology Supplement - National Prostate Cancer Audit</a>
<b>2.6a Do measures align with any of the following sources of evidence (select all that apply)</b>	NICE clinical guideline; NICE quality standard
<b>3.1 Results visualisation</b>	Annual report; Interactive online portal (run charts not available); Patient report
<b>3.2 Levels of reporting</b>	National; Trust or Health Board
<b>3.3 Timeliness of results feedback</b>	Within 1 year; Within 2 years
<b>Dataset #1 name</b>	NPCA Minimum Dataset
<b>Dataset #1 type</b>	Clinical audit - continuous
<b>Dataset #1 items collected (n)</b>	237
<b>Dataset #1 items from existing national datasets (n)</b>	237
<b>Dataset #1 use of existing national datasets</b>	Cancer outcomes and services dataset (COSD); Cancer waiting times (CWT); Cancer network information system Cymru (CaNISC); Hospital episode statistics (HES); Radiotherapy dataset (RTDS); Patient episode database for Wales (PEDW); Systemic anticancer treatment (SACT)
<b>Dataset #1 specification</b>	<a href="https://www.npca.org.uk/resources/npca-minimum-dataset/">https://www.npca.org.uk/resources/npca-minimum-dataset/</a>
<b>Dataset #2 name</b>	Patient survey
<b>Dataset #2 type</b>	Patient reported outcome measure
<b>Dataset #3 name</b>	Not applicable
<b>Dataset #4 name</b>	Not applicable
<b>When was your Healthcare Improvement Plan (sometimes referred to as a Quality Improvement Plan) last reviewed? Please upload under 'Files' below</b>	31/05/2022

**using naming convention  
(`'yyyymmdd_PROGRAMME-  
Workstream-HIplan'`).**

**Files** Paper 3\_NPCA\_QI Plan\_V1.4 31.05.22.pdf