



CoC Flash

A Monthly News Update from the Commission on Cancer of the American College of Surgeons



May 2003

Highlights of the Month:

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- Clarification of Letter to Programs Due for Survey Between July and December 2003
- CoC Extends Flexibility to All Approved Programs for Publication of the 2002 Annual Report
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CoC Holds Annual Committee Meetings

The committees of the Commission on Cancer met May 8-10, 2003 at the American College of Surgeons headquarters. Here's a list of several new initiatives that were discussed.

- A new Recruitment and Retention Subcommittee will be established under the auspices of the Committee on Approvals. This subcommittee will develop strategies to increase the number of new programs applying for CoC cancer program approval and will also develop and implement interventions for program retention.
- With the implementation of new CoC Cancer Program Standards in 2004, the role of the cancer liaison physician will change its focus to that of a community outreach coordinator. A targeted communication plan is being planned around this change.
- A monthly Web-based orientation program is being designed for introducing newly appointed and reappointed cancer liaison physicians to their role as volunteers for the CoC.
- CoC Disease Site Team proposals were approved for 19 observational review/surveillance studies utilizing NCDB data, and three special study peer-reviewed proposals were approved to be conducted over the course of the coming year.
- An Information Forum Session provided an update to CoC members and state chairs on several initiatives including HIPAA and the CoC, the 2004 Cancer Program Standards, the NCDB Hospital Comparison Benchmark Reports, activity of the Disease Site Teams, and member organization activities of the American Cancer Society and American Joint Committee on Cancer.
- CoC state chairs met with the cancer control planning managers from the 17 divisions of the American Cancer Society to discuss strategies for partnering at the local level with cancer liaison physicians and ACS staff and to review the status of the state cancer planning process.
- The CoC Executive Committee approved the addition of two new member organizations to the CoC. Please join us in welcoming the International Union Against Cancer (UICC) and the Association of Oncology Social Work (AOSW).

Additional details about each of these initiatives will be shared in the near future. If you have

any questions, please contact Connie Bura, Administrative Director for Cancer Programs, at cbura@facs.org.

Clarification of Letter to Programs Due for Survey Between July and December 2003

Several programs have asked for clarification of the modifications to surveys that will be conducted between July and December 2003 which were outlined in a recent mailing. The following information is offered to clarify those questions and concerns.

As indicated in the letter mailed to programs due for survey between July and December 2003, the Cancer Program Standards Workgroup and the staff team decided it was appropriate to eliminate several standards from the survey process at this time. The reasons for eliminating these standards from the July to December 2003 survey process are: 1) the standards duplicate other current standards; 2) the standards are part of the requirements of other organizations, or; 3) the standards have been removed from the new standards of the Commission on Cancer that will go into effect in 2004.

Examples of standards not being evaluated in surveys conducted between July and December 2003 include:

Standard 2.2.8: Monitors quality management and improvement through completion of patient care studies that focus on quality, access to care, and outcomes.

Reason: This standard duplicates the current mandatory standards 7.2.1 and 7.5.1.

Standard 2.2.10: Supervises the cancer registry and ensures accurate and timely abstracting, staging, and follow-up.

Reason: This standard duplicates the current mandatory standards 8.9.1 and 8.9.3.

Standard 2.2.14: Publishes an annual report by November 1 of the following year.

Reason: The publication date for the annual report has been removed from the new CoC standards that will go into effect in 2004.

Standard 3.4.2: Purely didactic lectures are limited to 25 percent of conference frequency.

Reason: The requirement for didactic lectures has been removed from the new CoC standards that will go into effect in 2004.

Standards 8.1.1-8.1.11: Registry Operations Standards

Reason: The new CoC standards for 2004 include specifications and additional flexibility for registry operations. Programs are expected to follow these specifications, but standards have not been established for these activities.

Programs surveyed during the July to December 2003 time frame will be asked to rate their compliance for each of the standards outlined in the letter. It is not necessary, however, for the Surveyors and Independent Consultants to rate these standards, and compliance with these standards will not be considered when determining the approval award.

The complete letter will be posted on the American College of Surgeons Web site at <http://www.facs.org/dept/cancer/coc/approval.html>.

CoC Extends Flexibility to All Approved Programs for Publication of the 2002 Annual Report

While programs due for survey from July to December 2003 have already been informed of a modification to the requirements for publication of the 2002 annual report, the CoC has extended this modification to include all approved cancer programs. The modification is as follows: "All programs may use a modified approach to meet the requirements for

the 2002 annual report."

2.2.13: Ensures content of the annual report meets requirements.

Current rule: Rate as Substantial Compliance (1) if the published 2002 report includes an in-depth analysis of a major site of cancer and survival data.

Modification to the requirement: If a 2002 annual report is not published, rate as Substantial Compliance (1) if documentation of the presentation of an in-depth analysis of a major site of cancer and survival data at a cancer conference is provided.

Note: The in-depth analysis of a major site of cancer and survival data must be presented at a cancer conference by **December 31, 2003**.

FORDS Implementation: A Follow-Up to NCRA

The common goal of hospital cancer registrars and the registry software vendor community which supports their work is to achieve maximum data integrity with the conversion of historic data to *FORDS* while meeting the immediate needs of registrars ready to begin abstracting 2003 cases. The CoC recognizes both the complexity of the task faced by registry vendors, and the increasing urgency felt by registrars to begin abstracting 2003 diagnoses.

Many hospital cancer registry vendors have indicated that they anticipate development, testing, delivery, and conversion to *FORDS* standards to be completed and delivered to their clients by July 1, 2003. In this case, hospital registry clients may prefer to follow the original NAACCR Implementation Guidelines and delay abstracting of 2003 cases until the update is available.

Alternatively, registries may choose to accession cases and abstract just the unaffected fields for now, re-abstracting the new and changed fields later. The Suspense File Abstracting Worksheet which the CoC made available in February to assist registrars record *FORDS* codes for cases diagnosed on or after January 1, 2003, identifies the data items that can be recorded electronically using *ROADS* codes and definitions without adverse consequences for data conversion to *FORDS* standards. Briefly, registries may record most of the items found in the "Patient Identification" and "Cancer Identification" sections of *FORDS*, some of the dates related to the administration of first course therapy, and all but a couple of the "Outcomes" items. Registries which elect to pro-actively record 2003 diagnoses in their electronic systems must review this worksheet with particular care, as Co-Morbidity and Complications items and most of the staging and first course therapy items will have to be re-abstracted after conversion is complete. The CoC recommends that registries consult with their vendor to determine how this tool can best be used in combination with their software. The worksheet can be found under the heading "Additional Information" on the Web at <http://www.facs.org/dept/cancer/coc/fordsmanual.html>.

During the transition from *ROADS* to *FORDS*, the CoC will assist approved programs in meeting the mandatory standards by allowing additional flexibility in three areas.

Standard 8.3.1: Abstracting is completed within six months from the date of initial diagnosis.

The abstracting delay period will be extended an additional six months to January 1, 2004, so that cancer registries can either delay the start of abstracting, or have the additional time needed to re-abstract and enter *FORDS*-specific data items into the cancer registry database.

Standards 8.5.1 and 8.5.2: The registry collects the required data set, and the registry utilizes the data definitions and codes in *ROADS*, respectively.

The program will meet the requirements for both standards while awaiting delivery of the *FORDS* software update. The program will maintain documentation from the cancer registry software vendor showing the expected delivery date for the *FORDS* software update.

For programs surveyed during the July through December 2003 period, a rating of Substantial Compliance (1) should be recorded for all three of these standards. The CoC cancer program Surveyors and Independent Consultants will receive this information through the next edition of the Surveyor Update.

ROADS to FORDS Conversion Rules

The CoC updated the *ROADS* to *FORDS* conversion rules and computer algorithm in early May. The updated set of conversion tables and executable conversion code are posted on our Web site at <http://www.facs.org/dept/cancer/ncdb/roadstofords.html>. Specifically, the updates include modifications of how the following four items are converted: *Date of First Surgical Procedure*, *Radiation/Surgery Sequence*, *Chemotherapy at This Facility*, and *Date Systemic Therapy Started*. The specific updates made since the release of the March 31 modifications are highlighted in blue to facilitate easier review by users.

CoC Speakers Bureau and 2003-2004 Educational Activities

The CoC is pleased to announce that beginning in July our Speakers Bureau will be in full swing again with a host of new educational programs. Our speakers for the Fall 2003-Spring 2004 session include CoC staff members plus the volunteers below:

Lynda Douglas (California), Ina Ervin (California), Connie Grace (Washington), Susan Koering (Minnesota), Sally Kruse (Florida), Margaret Martin (Massachusetts), Rosemary McKee (Texas), Donna Morrell (California), Cathy Rimmer (North Carolina), Veronica Shrode (Texas), Michelle Snyder (Maryland), Judy Wazenkewitz (New Mexico), Donna Weber (Tennessee)

As done previously, organizations requesting a speaker will be responsible for covering a portion of the travel expenses for each speaker. Beginning July 1, hosts will be required to cover up to \$750 towards these expenses. In order to keep costs down, every effort will be made to match meetings with speakers in the same geographical area. In addition, please submit your request at least 60 days before the date of your scheduled event to help reduce travels expenses. Please see our Web site at <http://www.facs.org/dept/cancer/coc/presrequests.html> for a complete list of details and information regarding speaker availability and costs.

Our new educational offerings for 2003-2004 will include the following:

- * New CoC Cancer Program Standards (2 hr)
- * FORDS Practicum (2-3 hrs)
- * Collaborative Stage Practicum (2-3 hrs)
- * AJCC TNM Cancer Staging 6th Edition Practicum (2 hr)
- * What is the Facility Information Profile System (FIPS) and How to Use It (1 hr)
- * HIPAA and Its Impact on the CoC and NCDB (1hr)
- * What Is the CoC's Inquiry & Response (I&R) System (1 hr)
- * The Anatomy of an NCDB Data Submission: Making Accurate Data Submissions (1 hr)
- * Overview of NCDB Benchmark Reports and How to Generate the Information You Need (1 hr)

In addition, "The Role of the Cancer Liaison Physician" (1 hr) and "Benefits of Being a CoC-Approved Cancer Program" (1 hr) will still be available.

Note: Although previously listed as an offering, "Benign Brain Tumor Case Finding and Reporting" will not be included as a CoC educational program. **Please contact your state central registry for a CDC-trained speaker on this topic after September 1, 2003.**

Finally, to request a speaker, please complete the speaker request form on our Web site and fax it to Kelly Poirier at (312)202-5009. Although we cannot guarantee the availability of a speaker, we will make every effort to accommodate your needs.

Apply Now For CoC-Trained Independent Cancer Program Consultants Workshop

See our Web site at <http://www.facs.org/dept/cancer/indconsultants.html> for a list of revised participant criteria and an application form for the CoC-Trained Independent Cancer Program Consultant training. Fax the completed application form, a CV or resume, and a sample of a past consultative report or 200-word essay on the benefits of cancer program evaluation by an Independent Cancer Program Consultant to Lisa Landvogt at (312) 202-5009.

The application deadline is July 31, 2003. Individuals selected to participate will be notified during the first week of August. The training is scheduled for September 25 and 26, 2003 at the American College of Surgeons headquarters in Chicago. A registration fee will be required.

Winners of *Cancer Program Standards 2004* Manual Giveaway

Congratulations to the lucky winners of our recent drawing during NCRA:

Cheryl Carlson, Spokane, WA
Becky Jones, Nashville, TN
Jeannine Noel, Montgomery, AL
Gloria Nimrod, Brooklyn, NY
Rochelle Victor, Atlanta, GA

Each person will receive a complimentary hard copy of the *CoC Cancer Program Standards 2004* manual scheduled for publication in July.

Collaborative Staging Web-Based Training Module

The Collaborative Staging Task Force is pleased to announce the availability of a new module to the SEER series of cancer registry Web-training modules called, "Intro to Collaborative Stage." The module includes an introduction to the Collaborative Staging System, followed by five interactive case exercises. Continuing education credits are available. To access this Web site, go to <http://www.training.seer.cancer.gov>. The Task Force gratefully acknowledges the contributions of the SEER Program in developing this module for inclusion in their training series. Contact Valerie Vesich at vvesich@facs.org for more information.

CoC Web Site Menu Reorganized

In a effort to better assist Web users, we've reorganized our CoC Web menu into three sections of resources with easy-to-read link text for quick navigation. The first section, "Commission on Cancer Information," contains general CoC information useful to cancer program staff. The next section, "Resources for CoC-Approved Programs," contains CoC Datalinks, our limited access, password-protected, secure section with links to information and databases meant specifically for approved cancer programs and their designated staff members. The final section on the menu contains "Public Resources." As indicated, this area provides information to cancer patients, their families, and care givers.

The CoC Releases Updates to its Web-Based NCDB Benchmark Reports

The CoC updated its public Web-based NCDB Benchmark Reports application on June 3, 2003. This easy-to-use application has been available for public use for over a year and has handled over 25,000 queries to date. The updated reports include patient demographics, tumor characteristics, treatment, and survival outcomes data for 11 major solid tumor sites using more than 3.5 million cases submitted to the NCDB for the diagnosis years 1995 through 2000. In addition, AJCC stage stratified calculated five-year observed survival rates are available for the same 11 cancer sites using over one million cases diagnosed in the years 1994 and 1995. An additional feature included in this update to the survival reports includes calculated site-specific overall survival rates.

Confidentiality is a priority and ALL patient and facility identifying information has been removed from the data accessed by the Benchmark Reports program. Useful "Help" screens are available to assist users in navigating the application and technical assistance is available from NCDB staff. Go to the "Public Resources" section of the CoC Web page at <http://www.facs.org/dept/cancer/index.html>, to access the "NCDB Benchmark Reports" and "NCDB Survival Reports" links.

Spotlight on CoC Member Organizations: Organization Initiatives

Twenty of the CoC's 36 member organizations recently submitted reports of their organizations current cancer initiatives. To view these reports, please visit our Web site at <http://www.facs.org/dept/cancer/index.html>.

To Subscribe to CoC Flash

CoC Flash is e-mailed automatically each month to individuals for whom the Commission on Cancer of the American College of Surgeons has an e-mail address. If you wish to continue to receive the newsletter on a monthly basis, you need do nothing. You can discontinue your subscription by writing to coc@facs.org, and requesting that your name be deleted from the

database. Individuals not currently receiving the newsletter may subscribe to the publication by sending an e-mail containing your name, address, telephone and fax numbers to coc@facs.org and asking to be added to our electronic distribution database.

To Submit Information

CoC Flash will accept submissions received by the third week of each month. However, the CoC reserves the right to decide whether or not the materials are appropriate for inclusion. Information for CoC Flash should be timely, newsworthy, brief, and of use and interest to the constituents of the Commission, which include cancer registrars, liaison physicians, cancer committee chairs, and other cancer-oriented health care professionals. To submit material, send it to coc@facs.org.

Mission

The Commission on Cancer is a consortium of professional organizations dedicated to reducing the morbidity and mortality of cancer through education, standard setting, and the monitoring of quality care. CoC Flash is a monthly news service for constituents of the CoC provided by the Commission and the Cancer Program of the American College of Surgeons.

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