

COSD v9

Acute Oncology Data Items

Advice and Guidance

Introduction

This guidance is prepared by the Acute Oncology Expert Advisory Group, Chaired by Dr Ernie Marshall.

The Acute Oncology Expert Advisory Group has a wide geographical and multi-disciplinary representation from the full range of professionals involved in delivering acute oncology services, as well as oversight from the fully constituted Chemotherapy Reference Group.

Any queries or questions about the content of this document or the new COSD Acute Oncology data items should be forwarded to Catherine Donnelly at Cancerreg@tst.nhs.uk, Data Work stream Lead for the AO Expert Advisory Group.

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Overview

Over the past several years, *NHS England's Chemotherapy CRG AO Export Advisory Group* has been working with Public Health England's *National Cancer Registration and Analysis Service* to secure the inclusion of some Acute Oncology data items into the next version of the Cancer Outcomes and Services Dataset (COSD).

The AO data items have now completed the formal process for inclusion in COSD v9 and the dataset and accompanying information has now been formally published here:

Official COSD v9 User Guidance can be accessed here (*once on the web page, scroll down the page to the COSD Main Dataset section and select the COSD v9.0 User Guide link*):

http://www.ncin.org.uk/collecting_and_using_data/data_collection/cosd_downloads_v9

See pages 85 to 92 for Acute Oncology section.

This will be the first time AO items have been collected on a national scale and there are steps for you to take to ensure you get the support you need from your local Organisation, your regional networks and from your system suppliers.

Ultimately, the AO data you provide will be used to:

- Produce a national picture of demand for urgent and unscheduled care for cancer patients
- Give us a more accurate idea of how many Unknown Primary, Neutropenic Sepsis and Metastatic Spinal Cord Compression patients that present for urgent care
- Help track those cohorts of patients who are currently invisible or very hard to identify such as those patients currently living with and beyond cancer and those patients with untreatable metastatic disease
- Build up a picture of activity volumes within the new 'Neighborhoods' and identify areas for service development and improvements that will attract investment from regional and national commissioners.

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What Next

The first things to do are find out who owns the COSD collection and submission for your Organisation and make contact with them and also make contact with whomever manages the delivery of Cancer Services within your Hospital – they will be keen to know AOS data is being incorporated into COSD.

The second thing to do is:

- Establish a group with relevant knowledge and skills, including your COSD contact
- Compare the current AO dataset you collect with the new COSD v9 AO dataset
- Review the systems and processes you use to collect your AO data
- Identify any other teams involved in the collection of any of the new COSD v9 AO data items, e.g. your Sepsis team, spinal teams, etc.
- Draw up a list of changes.

The third thing is:

- Establish if your current data collection systems can be adapted to reflect the necessary changes:
 - Contact suppliers and find out what their change process is and what their timelines are
- Or look at these alternatives:
 - Adopting existing solutions (e.g. SCR AO module with linked Cancer record and integral COSD reporting)
 - Adapting existing systems (e.g. configuring CIMS Infoflex, Mosaiq, Cerner, etc.)
 - Procuring a new system (dedicated AO products are available)
 - In-house development (if you have an Application Development team available to you)
 - Data warehousing data from multiple sources
 - Something else!

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What is Being Collected

In the day to day running of your AOS and other related services, and for your local and national audits, e.g. QS reporting, you will collect certain information about the patients you see, the date and time of any assessments and the outcome of each assessment. The new COSD v9 data items have been chosen with this in mind. The items are:

- Assessment Date: the date of each face to face assessment
- Organisation Code: the code of the Organisation employing the AOS carrying out the assessment
- Patient Type: the reason behind the patient's AO episode e.g. their cancer or treatment has made them acutely unwell
- Assessment location: the location of the patient when they were assessed, e.g. A&E, OPD etc.
- Outcome: what was the outcome of each assessment, e.g. was the patient well enough to be discharged from hospital care or did they need to stay in for 24 or more hours?

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Timelines

September 2019

COSD v9 has been ratified by the Secretary of State and published to all NHS Trusts and Treatment Centres providing Cancer Services in England.

September 2019 to April 2020

Cancer Service providers will review the new Dataset and update their processes and systems to accommodate the changes.

April 2020

From 1st April 2020 all Cancer Service providers should be collecting the new Dataset.

July 2020

All Cancer Service providers will submit their 1st April to end of June data.

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Key Questions

Questions to ask yourself and your group:

- Do you need to write a business case or request funding?
- Do you need involvement from your Application Development or IT team?
- Do you need to contact your supplier to request changes?
- Who needs to be involved in the process?
- What's my deadline? E.g. no later than June 2020

The answers to these questions will help you draw up a plan of action and start the ball rolling.

We know that moving IT and process changes forward can be a slow going within the environments of the NHS, which is why we are contacting you now, before the formal announcement in September – the hope is that these additional weeks will help get things moving and help you meet the deadline.

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