



# NKCA

National Kidney  
Cancer Audit

NKCA, Clinical Effectiveness Unit

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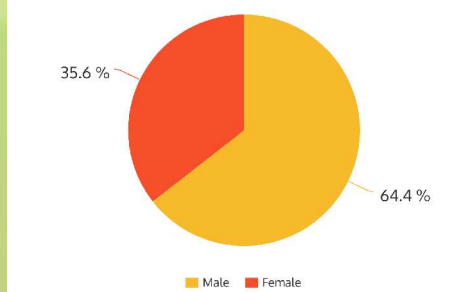
 [NKCA\\_NATCAN](#)

## NKCA Newsletter, Summer 2023

### Want to hear more?

The NKCA is part of the National Cancer Audit Collaborating Centre (NATCAN). If you want to find out more about NATCAN visit our [new website](#). If you would like to receive regular updates send us an email [NATCAN@rcseng.ac.uk](mailto:NATCAN@rcseng.ac.uk)

Figure 1: Proportion of kidney cancer diagnoses by sex (2017/18)

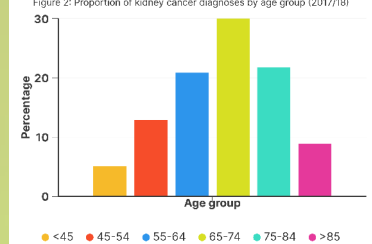


### Announcing the launch of NKCA!

We are excited to announce the launch of the new **National Kidney Cancer Audit (NKCA)** as part of National Cancer Audit Collaborating Centre (NATCAN), hosted by the Clinical Effectiveness Unit at the Royal College of Surgeons since October 2022. Commissioned by the Healthcare Quality Improvement Partnership on behalf of NHS England and the Welsh Government, NATCAN will be a new national centre of excellence in cancer audit.

Building on the previous work of the [Kidney Cancer UK Accord](#) (Kidney Cancer UK Quality Performance Audit of kidney cancer services in England - Figures 1 and 2), the **audit aims to support NHS services** to increase the consistency of access to treatments and help guide quality improvement initiatives and **stimulate quality improvements** leading to better outcomes for patients.

Figure 2: Proportion of kidney cancer diagnoses by age group (2017/18)



### Introducing the NKCA Team

#### NKCA Clinical Leads

**Prof Grant Stewart**, Clinical Lead Urology is Professor of Surgical Oncology, University of Cambridge and Honorary Consultant Urological Surgeon, Addenbrookes Hospital, representing the British Association of Urological Surgeons (BAUS).



**Prof Amit Bahl**, Clinical Lead Oncology is a Consultant Clinical Oncologist, University Hospitals Bristol, representing the British Uro-oncology Group (BUG).

Senior Methodologist **Prof Jan van der Meulen**, Data Analyst **Emily Mayne** and Senior Project Manager **Dr Marina Parry** make up the rest of the Project Team.

### The data

A guiding principle for NKCA is to **keep the burden of data collection to a minimum** by using existing national datasets (e.g., Cancer Registration Data and Hospital Episode Statistics) rather than collecting bespoke data.

For English patients, the NKCA has access to the Gold Standard dataset and rapid cancer registration dataset (RCRD). The RCRD allows timely and frequent (at least quarterly) reporting to cancer services. The Gold Standard dataset provides a richer description of patients but is less timely presently. During the first year, we will explore how to use these datasets to define robust indicators that can support the NKCA's quality improvement initiatives and decision making by cancer services.

The data (diagnoses from 01.01.2015 to latest available) should provide us with the **necessary information** on the disease characteristics of patients, their diagnostic pathways, their combinations of treatments and their outcomes.