NDRS
NATIONAL DISEASE REGISTRATION SERVICE

NHSE – NDRS

NDRS Quality Improvement Plans

Simon Cairnes – Regional Data Liaison Manager

Introduction

- National Disease Registration Service (NDRS) is a part of NHS England (NHSE)

- NDRS receives Monthly Mandated cancer data returns from every NHS Trust
  - Cancer Outcomes & Services Dataset (COSD)
    - *Demographics, Diagnosis, Stage, Pathway events, MDT, Treatments…*

- NDRS Analyses and curates the data for analytical outputs
  - *Granular levels available: national, cancer alliance, Individual Trust, Individual Tumour level*

- NATCAN data sources COSD submissions as part of their methodology including National Non-Hodkin Lymphoma Audit (NNHLA)

Introduction

- NDRS Data Liaison team exists to help facilitate data improvement in NHS trusts & their cancer data returns
  - Improving COSD completeness can improve Audit data

- Our liaison managers have worked with all trusts nationally on data improvement for all cancers.
  - We have worked with trusts on improving Haematological data with success and look to replicate best practice nationally
    - https://www.natcan.org.uk/wp-content/uploads/2025/06/NNHLA-Key-COSD-Data-Items-V2.0-January-2025.pdf

    - Site specific staging Data for COSD: Ann Arbor, Binet & R-ISS

Where to find data completeness reported?

Available NDRS Resources for Data completeness

- There are available resources that show data capture for current diagnoses
- Diagnoses up to 12 months prior to current date can still be updated and resubmitted to NDRS
- Understanding data completeness now assists SOTN reporting in the future

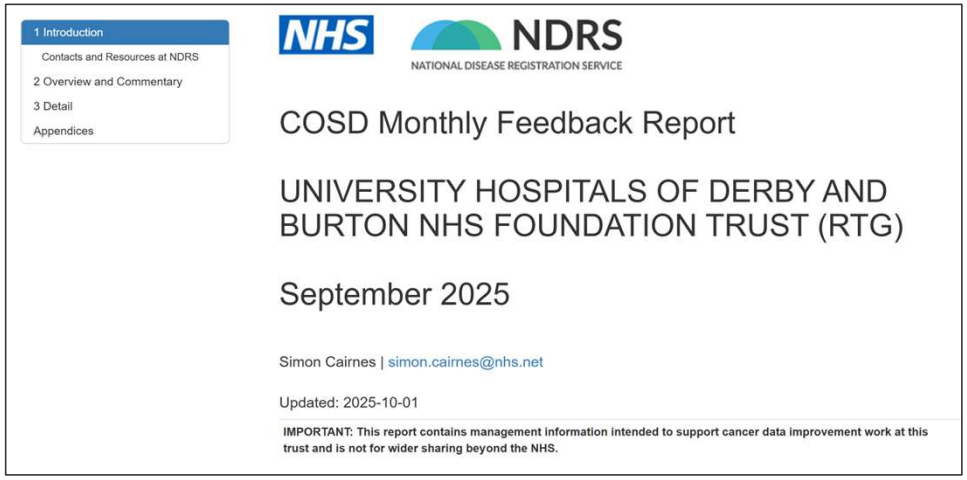
Available NDRS Resources for Data completeness

- Monthly COSD Feedback report emailed to all cancer services managerial teams on the first working day of the month

- Cancerstats2 platform - https://cancerstats.ndrs.nhs.uk/
  - NHS account required – Updated daily

- Public facing dashboard - Staging completeness dashboard – NDRS No account required – Updated Monthly

Monthly Feedback Report



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2 Overview and Commentary
3 Detail
Appendices

NHS NDRS
NATIONAL DISEASE REGISTRATION SERVICE

COSD Monthly Feedback Report

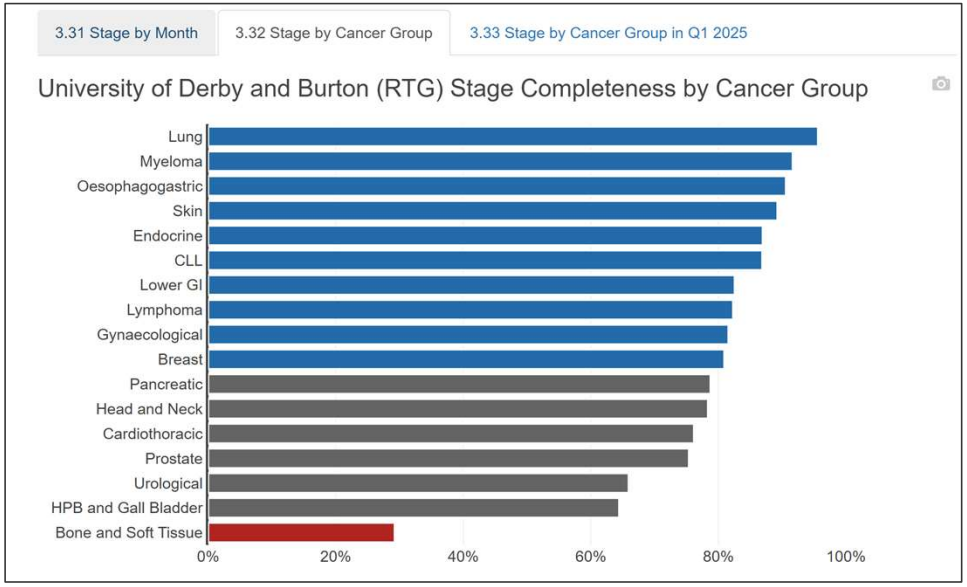
UNIVERSITY HOSPITALS OF DERBY AND BURTON NHS FOUNDATION TRUST (RTG)

September 2025

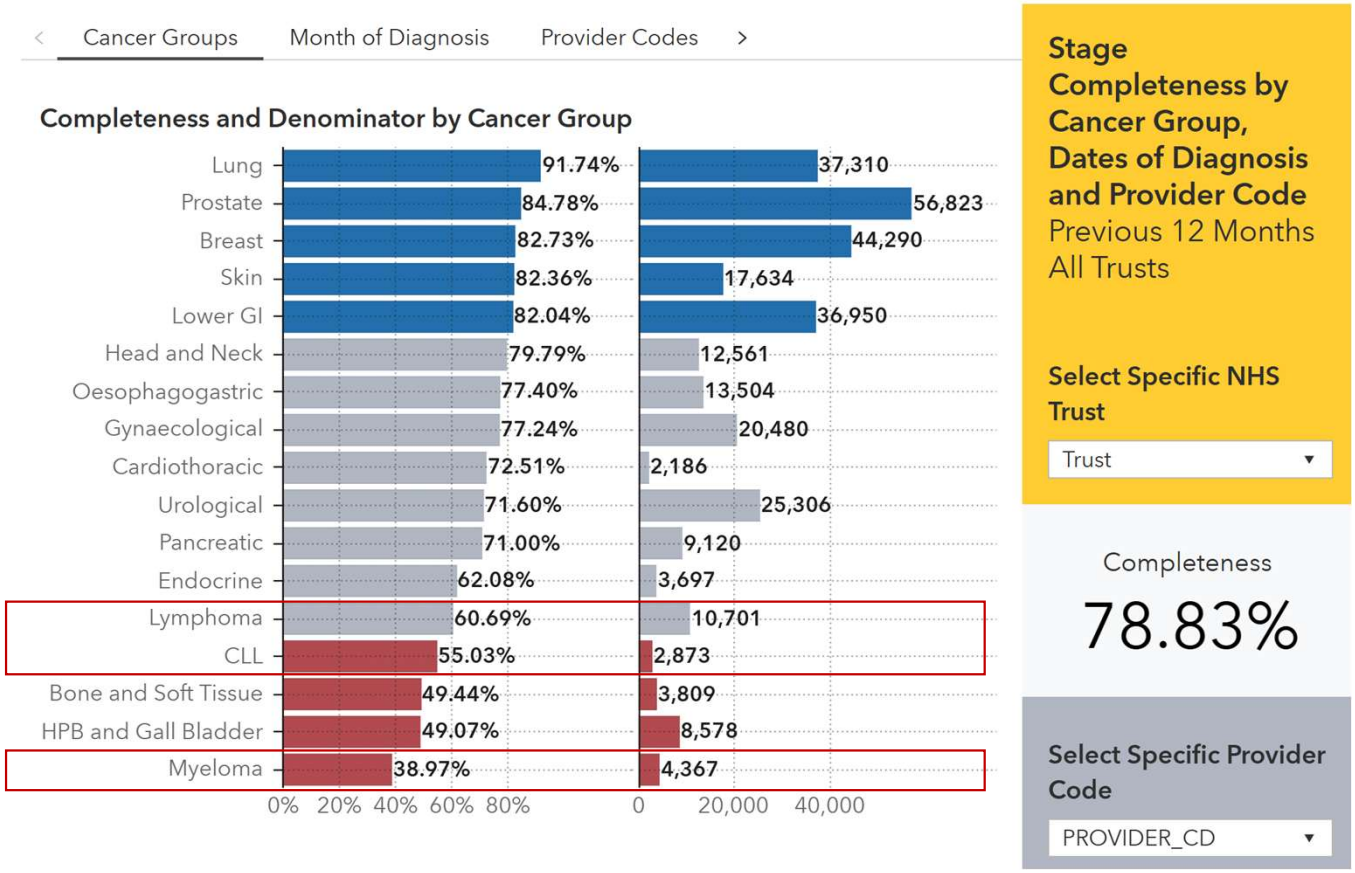
Simon Cairnes | simon.cairnes@nhs.net

Updated: 2025-10-01

IMPORTANT: This report contains management information intended to support cancer data improvement work at this trust and is not for wider sharing beyond the NHS.



Cancerstats2 - COSD Full Stage completeness by Tumour level (Aug 24 – Jul 25)



Available Resources for Data completeness

- NATCAN SOTN reports:
  - https://www.natcan.org.uk/reports/nnhla-state-of-the-nation-report-2025/

This overview is based on retrospective diagnoses.

Trust comments on low staging completeness

Trust comments on poor data completeness

- It's a complex Tumour site
- Cancer management not always sure what data needs completing
- Haematology being a smaller tumour site is often de-prioritised
  - Inconsistent cover at MDT's
  - Shared MDT coordinator roles with other larger tumour sites
  - Improvement not focussed on due to smaller performance benefits
- Non-Review of what data is submitted/not submitted by management
- Relevant training not always given to admin members

Internally improving data completeness

Improving Data capture for COSD / NNHLA

- Tri-angulatory responsibility from the submitting NHS trust in terms of Data Completeness:

- Consultant
- MDT Co-Ordinator
- Cancer Services Management

- Most issues in the capture of COSD staging data can normally be rectified in identifying any disconnect in the

Consultant Input into Data Capture

- **Responsibility:** To identify and communicate Stage of patient disease

- Considerations:
  - Am I communicating & documenting Staging at MDT appropriately?
  - Is dictating the patient's stage as part of clinical letters leaving an Auditable resource?
  - Am I checking/aware of available performance reports for My trust on Staging?
    - Do I agree or disagree with the reporting against my experiences
  - Am I making myself available to both the coordinator & cancer services manager for queries?

MDT Co-ordinator Input into Data Capture

- **Responsibility:** To input the given stage correctly into the Trust Cancer Database

- Considerations:
  - Am I appropriately aware of stage being given at MDT?
    - Have I been trained to recognise this?
  - Am I aware pre-MDT of patients without documented stage?
  - Am I asking at MDT for staging?
  - Am I appropriately recording this in the correct location in my cancer database?
  - Am I approaching my CNS colleagues for assistance?
  - Am I speaking to the Cancer Services Manager to discuss improvement?

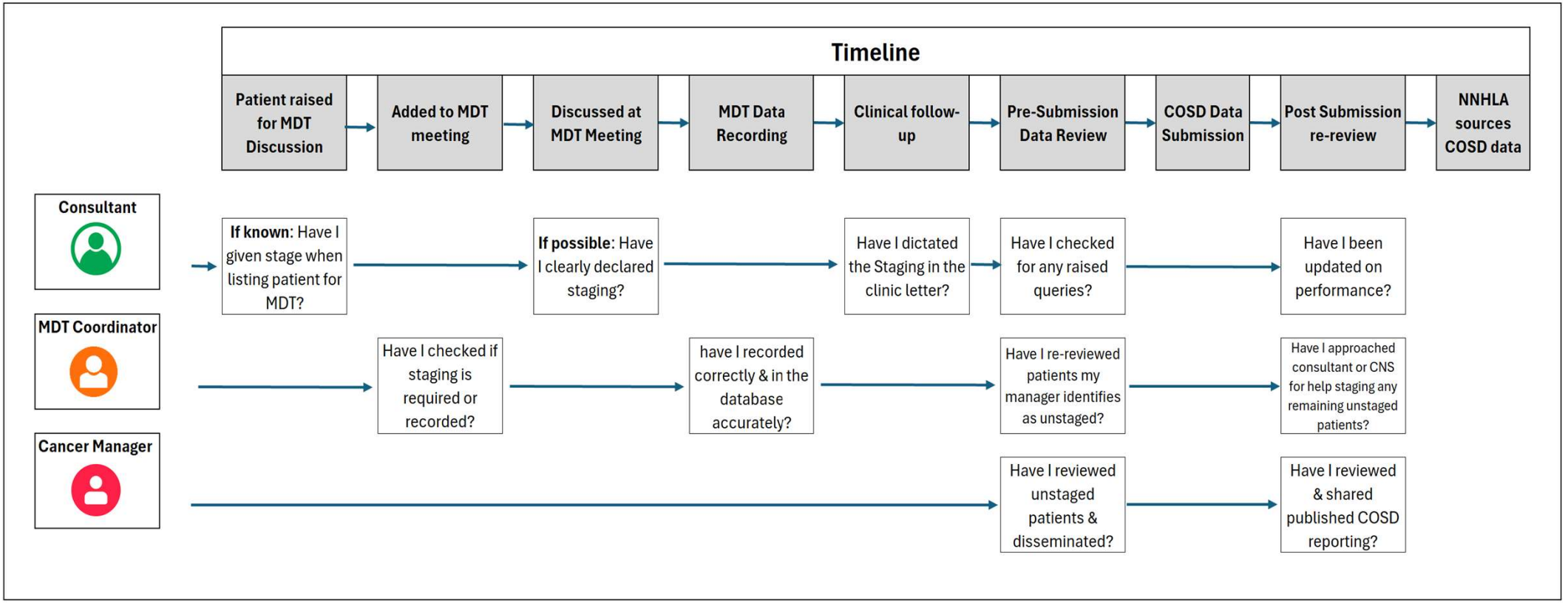
Cancer Services Manager Input into Data Capture

- **Responsibility:** To performance manage

- Considerations:
  - Am I aware of available reporting / informing colleagues of reporting?
  - Have I reviewed how my MDT Co-ordinator is performing / what challenges they may have?
  - Am I able to identify at patient level patients staged vs. unstaged patients?
  - Have I liaised with my local Data Liaison Manager for support?
  - Am I prospectively trying to improve data capture?
    - Reviewing/evolving the data capture process?

The Robust Process

The Robust Process



An example of Efficiency

Data Liaison Manager Input into Data Capture

- Responsibility: To assist with performance management

- Considerations:
  - Can I offer insight into current performance?
  - Can I evolve the current processes?
  - Can I offer training / perspective?
  - Can I assist virtually or on-site?

Bradford Teaching Hospital 03.10.2025

- Data Liaison Manager and Cancer Services manager reviewed Lymphoma staging performance (2025 Diagnoses)

- Current lymphoma staging 56%
- 30 Unstaged Lymphoma patients

- 22 Stages found by emailing consultants in the ‘pre-submission data review’ - (new aggregate 88%)

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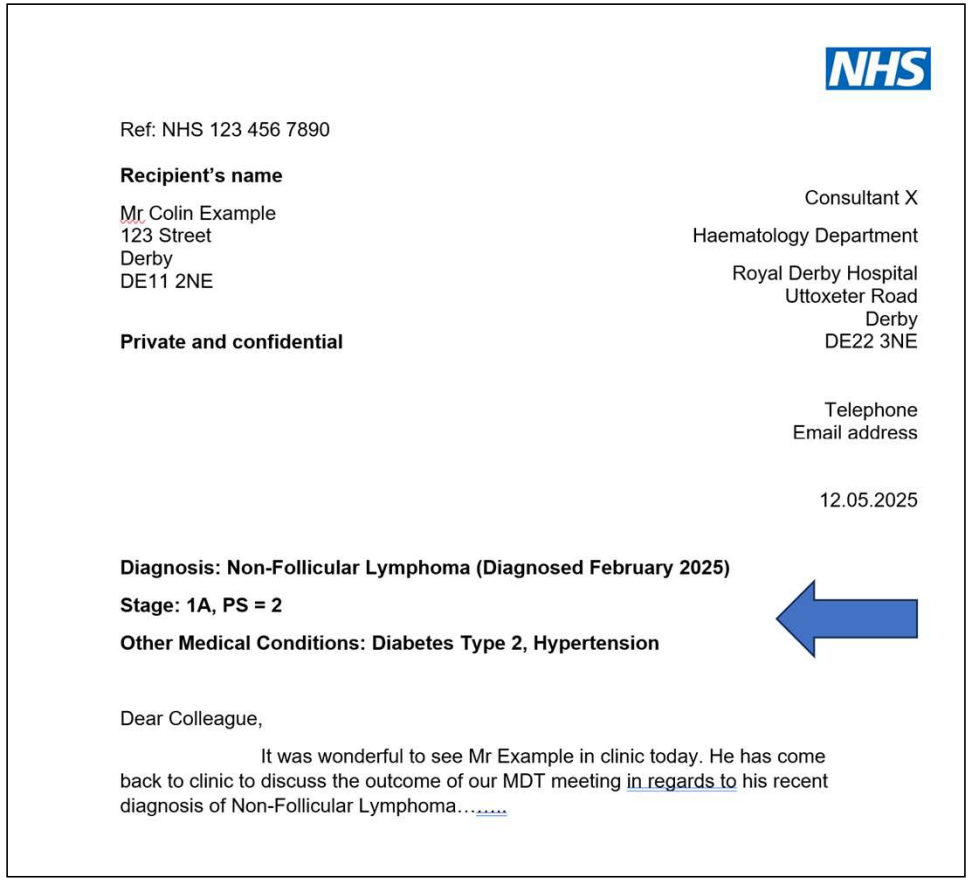

NHS

Ref: NHS 123 456 7890

Recipient’s name

Mr Colin Example
123 Street
Derby
DE11 2NE

Private and confidential

Consultant X

Haematology Department

Royal Derby Hospital
Uttoxeter Road
Derby
DE22 3NE

Telephone
Email address

12.05.2025

Diagnosis: Non-Follicular Lymphoma (Diagnosed February 2025)

Stage: 1A, PS = 2

Other Medical Conditions: Diabetes Type 2, Hypertension

Dear Colleague,

It was wonderful to see Mr Example in clinic today. He has come back to clinic to discuss the outcome of our MDT meeting in regards to his recent diagnosis of Non-Follicular Lymphoma…….

Any Questions?

E-Mail: Simon.Cairnes@nhs.net

My Colleagues information: