

# Priority Project Reports

## Breast

1. **Project Title:** Statewide Breast Minimum Dataset

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### 2. Project Coordinator(s) Contact details

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### 3. Project Description

Cancer Institute NSW data manager, Carina Mok, piloting NBCC statewide breast minimum dataset extension in a one-year cohort of >500 patients.

The intent is to assess the cost, feasibility and benefits of implementing the NBCC dataset extension, which complements the Minimum Dataset for Clinical Cancer Registration.

The pilot sites are Sydney South West Area Health Service (SSWAHS) and Lismore Base Hospital, North Coast Area Health Service (NCAHS).

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### 4. Deliverables as detailed in project contract

- To pilot a 35 item breast cancer specific minimum dataset.
- To compare the availability, commonality and completeness for the 35 data items with NBCC and RACS audit.
- To report issues and problems relating to the data collection.
- To make recommendations for improving the collection of breast cancer data.

### 5. Description of activities undertaken

- Preparation and commencement.
- Introduction/ Training on ClinCR and Breast Data Set Extension project.

- SSWAHS/ Facility Orientation.
  - Implementation of MDT Dx & Rx form.
  - Review data item mapping NBCC fields and values to Précis.
  - Indicator Panels for Précis – Breast Cancer Core Dataset.
  - Indicator Panels for Précis – Breast Cancer Dataset Extension.
  - First Evaluation Report for Précis Breast Cancer Core Data Set.
  - Configuration of Précis.
  - Identification of data collection resource Lismore.
  - Governance established.
  - Configuration of Précis.
  - Establish data collection form SSWAHS.
  - Establish data collection form Lismore.
  - First report to NSWOG Breast.
  - Establish indicator panel.
  - First MDT meeting.
  - Data report - three month feedback (NSWOG mtg).
  - Data report - six month feedback (NSWOG mtg).
  - Data report - nine month feedback (NSWOG mtg).
  - Completion of cohort.
  - First analysis.
  - Commencement for collection on retrospective data.
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### 6. Project outcome(s)

e. Did the project complete all the deliverables listed in the contract

Yes     No

f. What do you believe will be the ongoing benefits of this project?

36 data items will be minimized to approx. 20, to ease the collection of the extension data set.

BCDE will be amalgamated with the breast cancer minimum data set to become a one-man task.

After the completion of the retrospective data collection, prospective data collection will be able to preform for better comparison of the data completeness, availability and commonality as the data are more up-to-date. Details for the surgical and treatment information will be discussed fully at the MDT meetings.

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**7. Please list any presentations, abstracts, papers or reports that have been submitted upon the work of this project.**

NSWOG Presentation – 31 Oct 2008

Report for NSWOG 31 Oct 2008

Report for NBCC

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**8. General comments**

Easier access to patient's data for retrospective data collection, however, prospective data collection might be able to reflet a better result for certain specific data items (eg Surgical margins, tumour size, HER2, ER and PR status).

Prospective data collection will be time-consuming and labour intensive, having one person collecting 10 (max) patients' surgical/clinical information at each MDT meeting for the cohort, and usually follow up data will not be available in three–six months' time for each patient.